



County Borough of Derby.

ANNUAL REPORTS

OF THE

MEDICAL OFFICER OF HEALTH

AND

CHIEF SCHOOL MEDICAL OFFICER

FOR THE

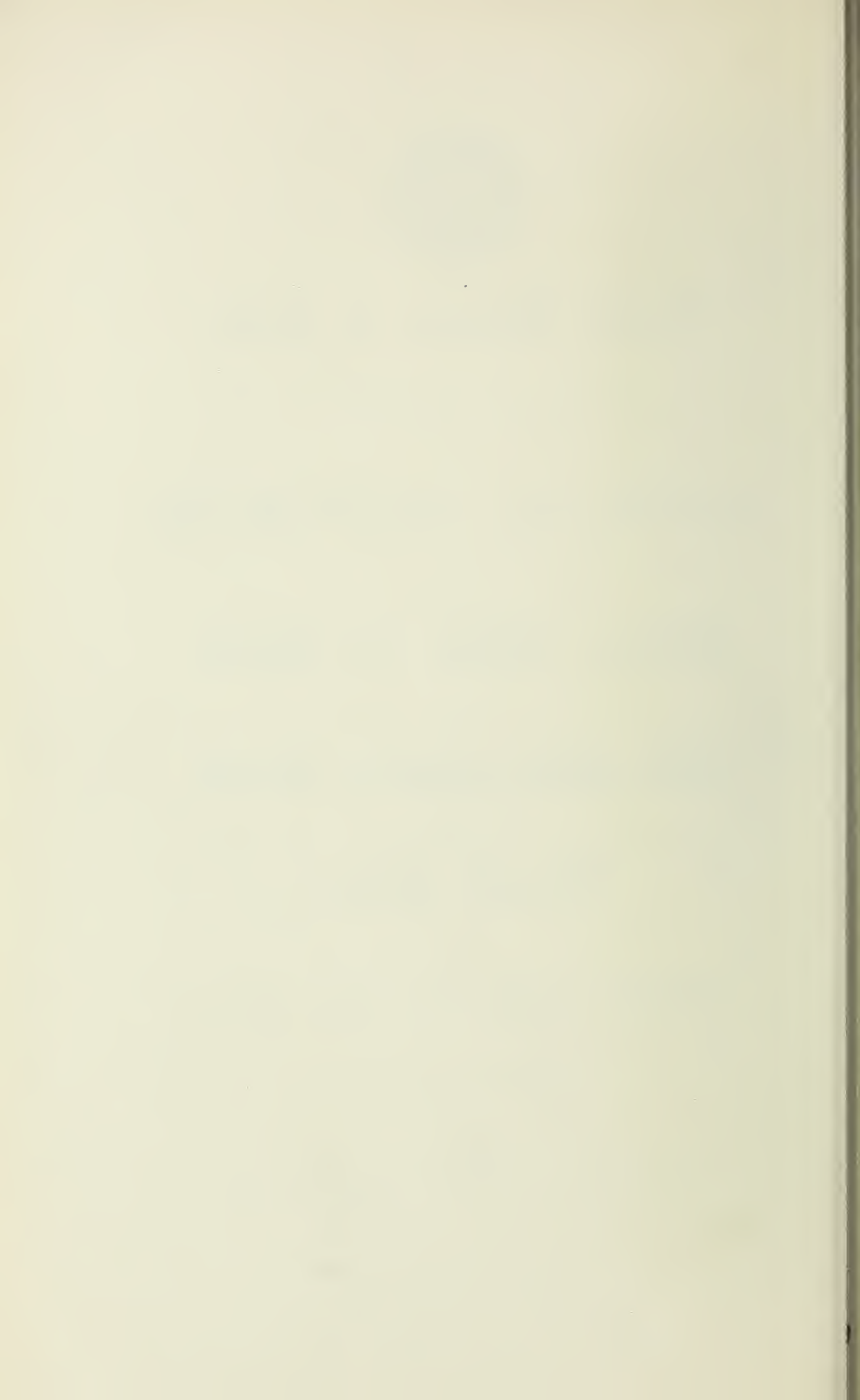
YEAR 1938,

BY

GORDON LILICO, M.B., Ch.B., D.P.H.

DERBY:

J. W. SIMPSON AND SONS, LTD., PRINTERS, FRIAR GATE.



CONTENTS.

	PAGE
INTRODUCTION AND SUMMARY—	
Staff ... ..	... 3, 4, 5
Letter to the Chairman and Members of the Health and Education Committees ... ..	... 7—11
HEALTH REPORT—	
I.—GENERAL—	
(Including Population and Vital Statistics, Mortality Tables as prescribed by the Ministry of Health, Rainfall, Laboratory Facilities, Poor Law Medical Out-Relief, Ambulance Facilities, Clinics and Treatment Centres, Legal Summary)	... 14—26
II.—MATERNITY AND CHILD WELFARE—	
Report by Dr. A. Morrison, Senior Child Welfare Medical Officer, including Reports by Dr. A. R. McKail, Medical Supervisor of Mid- wives, etc., and Mr. A. Stafford, Senior School Dental Officer ... ..	... 28—39
Municipal Midwifery Scheme ... ..	... 28
Midwives ... ..	... 29
Ante-Natal Clinics ... ..	... 29
Post-Natal Clinics ... ..	... 29
Dental Services ... ..	... 29, 30
Puerperal Pyrexia ... ..	... 31
Maternal Mortality ... ..	... 31
Births ... ..	... 31
Infantile Mortality ... ..	... 32, 33
Ophthalmia Neonatorum ... ..	... 33
Pemphigus Neonatorum ... ..	... 33
Baby Incubators ... ..	... 33
Artificial Feeding ... ..	... 33
Maternity and Child Welfare Centres ... ..	... 33—35
Voluntary Helpers ... ..	... 34
Children of Pre-School Age ... ..	... 35, 36
Work of the Health Visitors ... ..	... 37
Medical Aid Forms ... ..	... 37
Medical Practitioners' Fees ... ..	... 37
Dried Milk, etc. ... ..	... 37
Home Helps ... ..	... 38
Nursing in the Home ... ..	... 38
Nursing Homes ... ..	... 38
Children Act, 1908 ... ..	... 39
III.—SCHOOLS—	
Report by Dr. A. Morrison, School Medical Officer ... ..	... 42—94
Accommodation, School ... ..	... 46
Appendices ... ..	... 82—94
Attendance, School ... ..	... 46
Blind, Deaf, Defective and Epileptic Children ... ..	... 68, 69
Co-operation of Parents, Teachers, Children's Welfare Officers and Voluntary Bodies ... ..	... 67
Co-ordination ... ..	... 46
Employment of School Children ... ..	... 71
Findings of Medical Inspection ... ..	... 48—50
Following-up ... ..	... 51
General Review ... ..	... 44—46
Health Education ... ..	... 71
Hygiene, School ... ..	... 47
Infectious Diseases ... ..	... 61, 62
Meals, Provision of ... ..	... 66, 67
Medical Inspection in Schools ... ..	... 47

	PAGE
Miscellaneous Examinations	72, 73
Nursery School and Classes	69
Nurses, School	71, 72
Open-Air Education	62
Parents' Payments	71
Physical Training	62—66
Secondary Schools and Other Institutions of Higher Education	70
Special Enquiry	73—81
Special School	68
Staff	46
Summary	42, 43
Treatment	51—61
Vaccination	50
Verminous Conditions	72

IV.—INFECTIOUS DISEASES—

Report by Dr. W. E. Haigh, Assistant Medical Officer of Health	96—112
Pathological Facilities	96, 97
Streptococcal Infections	97
Vaccination of Infants during 1938	97
Communicable Diseases	97
Home Nursing	98
Infectious Diseases Hospital	98
Cases—Ages, Ward Distribution, Quarterly Summary and Action taken	99—102
Notifiable Diseases during the year	100
Bacteriological Examinations	100
Scarlet Fever	103
Diphtheria, Antitoxin, and Diphtheria Prophylaxis	104—108
Enteric Fever	109
Dysentery	109
Abortus Fever	110
Acute Anterior Poliomyelitis	110
Cerebro Spinal Meningitis	110
Measles	110
Whooping Cough	110
Epidemic Jaundice	111
Ophthalmia Neonatorum	111
Disinfection and Disinfestation	111
Cancer	112
Venereal Diseases—Report by Dr. H. Morgan Richards	113—115

V.—TUBERCULOSIS—

Report by Dr. W. H. Wray, Tuberculosis Medical Officer	118—130
Notifications, Deaths, etc.	118, 121, 122, 130
Contacts	118
X-Ray Work	118
Family History	119
Dental	119
Nurses' Visits	119
Housing Conditions	119
Tuberculosis Clinic	119
Disinfections, etc.	119
School Children	119
Borough Sanatorium	120
Dispensary	122, 123, 126—129
Institutions	123—125
Tuberculous Employees in the Milk Trade	130
Public Health Act, 1936, Section 172	130
Summary	130
Charity Organisation Society	130

VI.—HOSPITALS—

Isolation Hospital and Sanatorium—

Report by Dr. R. J. O. Taylor, Resident Medical

Superintendent	...	...	...	...132—135
General Statistics	...	...	...	... 132
Other Cases	...	...	...	... 132
Scarlet Fever	...	...	...	... 132
Diphtheria	...	...	...	... 133
Other Diseases	...	...	...	... 133
Staff	...	...	...	... 133
Nursing Staff	...	...	...	... 133
General	...	...	...	... 134
Dental	...	...	...	... 134
Borough Sanatorium	...	...	...	... 134
Laboratory	...	...	...	... 134
Provisioning	...	...	...	... 135

City Hospital—

Report by Dr. R. G. Cooke, Resident Medical

Superintendent	...	...	...	...136—144
Institutional Treatment of the Sick—				
Form Hosp. 6	...	...	...	...136—140
Relating to Maternity Hospitals and				
Homes—Form MCW 96a	...	...	...	...140—141
Massage Department	...	...	...	... 141
X-Ray	„	...	...	... 141
Dental	„	...	...	... 141
Pathological	„	...	...	... 142, 143
Treatment of Cancer—Form Hosp. 7	...	...	...	... 143, 144

VII.—SANITARY CIRCUMSTANCES OF THE AREA—

Report by Mr. H. J. Morgan, Chief Sanitary Inspector

Introduction	...	...	...	...146—178
Water Supply (including report by Mr. T. Farrington, Borough Water Engineer)	...	...	...	... 146
Sewerage—Report by Mr. E. H. Bennett, Borough Surveyor	...	...	...	...146—150
Rivers Pollution	...	...	...	... 150, 151
Closet Accommodation	...	...	...	... 151
Refuse Collection and Disposal—Report by Mr. A. Connor, Cleansing and Transport Superintendent	...	...	...	... 151, 152
Inspections and Notices	...	...	...	...152—154
Shops and Offices	...	...	...	... 154
Camping Sites	...	...	...	... 154
Smoke Abatement	...	...	...	... 154
Swimming Baths and Pools	...	...	...	... 154, 155
Eradication of Bed Bugs	...	...	...	... 156
Housing	...	...	...	...156—162
Introduction	...	...	...	... 156, 157
Statistics	...	...	...	...157—159
Overcrowding	...	...	...	... 159
Fitness of Houses and reconditioning	...	...	...	... 160
Houses erected, etc.—Report by Mr. J. P. Lovell, Borough Estates Manager	...	...	...	... 160, 161
Details of work done under Section 9 of the Housing Act, 1936	...	...	...	... 161, 162
Milk	...	...	...	...162—165
Introduction	...	...	...	... 162
Bottles and Cartons	...	...	...	... 163
Dairies, Cowsheds and Milkshops	...	...	...	... 163
Examination for Tubercle Bacilli	...	...	...	... 163
Clean Milk and Bacterial Count	...	...	...	... 163, 165
County Laboratory Examinations	...	...	...	..... 164

	PAGE
Meat ... ..	...166—168
Inspections ... ..	... 166
Carcases condemned ... ..	... 166
Disposal of Condemned Meat ... ..	... 166
Unsound Food condemned ... ..	... 166
Slaughterhouses ... ..	... 167
Public Abattoir ... ..	... 167
Slaughtermen's Licences ... ..	... 167
Tuberculosis Order, 1938—Report by Mr. E. A. Hornsby, Markets Superintendent ...	167, 168
Food Preparing Premises ... ..	... 168
Ice Cream Manufacturers and Dealers ... ..	... 168
Bakehouses ... ..	... 168
Food and Drugs (Adulteration) Act, 1928— Report by Mr. R. W. Sutton, Borough Analyst ...	...169—173
Artificial Cream Act, 1929 ... ..	... 173
Public Health (Preservatives in Food) Regulations 1925 and 1927 ... ..	... 173
Merchandise Marks Act, 1926 ... ..	... 173
Factories Act, 1937 ... ..	... 173, 174
Outworkers ... ..	... 174
Public Conveniences ... ..	... 175
Mice and Rats (Destruction) Act, 1919— Report by Mr. E. A. Hornsby, Officer under the Destructive Insects and Pests Acts ...	... 175, 176
Common Lodging Houses ... ..	... 176
Houses Let in Lodgings ... ..	... 176
Offensive Trades ... ..	... 176, 177
Canal Boats Act, 1884—Annual Report ... ..	... 177
Houses of Entertainment ... ..	... 178
Rents Restriction ... ..	... 178
Police Court Proceedings ... ..	... 178
Conclusion ... ..	... 178

STAFF.

GORDON LILICO, M.B., Ch.B., D.P.H.,
Medical Officer of Health, Medical Officer to the Education and
Public Assistance Committees.

WILLIAM E. HAIGH, F.R.C.S., L.R.C.P., D.T.M., D.P.H.,
Senior Assistant Medical Officer.

HARRY J. MORGAN, R.S.I., Chief Sanitary Inspector.

C. CLARKE, R.S.I., Meat Certificate, Assistant Chief Sanitary Inspector.
P. H. SHARDLOW, R.S.I.; A. C. W. LYON, R.S.I.; S. PRIME, R.S.I.,
Meat Certificate; D. MAYNARD, Cert. R.S.I. & S.I.E.J.B., Housing
Inspectors.

R. DAVIES, Cert. R.S.I. & S.I.E.J.B., A. HEALEY, Cert. R.S.I. &
S.I.E.J.B., G. M. JENKINS, Cert. R.S.I. & S.I.E.J.B., District
Inspectors.

E. G. HARDY, R.S.I.; Special Inspector.

E. WALLS, Certified Midwife, M.C.W., R.S.I., and Nursing Certificates,
Infectious Diseases Nurse.

W. BAGSHAW, Administrative Officer and Vaccination Officer; W. T.
PRITCHARD, R. E. GOODALL, H. THURMAN, G. HARRISON, W. E. GREEN,
H. H. CRINAGE, J. H. HUNT, C. H. SARGENT, C. N. WITHINSHAW,
J. T. SHAW, A. WENN, R. FORD, F. TAYLOR, D. CHAPMAN, S. MARGETTS,
A. ROOME, K. WRIGHT, J. WILLATT, R. S. BRINDLEY, Clerks in the
Health Department.

Drivers 3, Disinfectors, Orderlies, etc., 2.

*JAMES McCLEMONT, M.R.C.V.S., Veterinary Surgeon (Health and Markets
Committees). (Terminated duties 31st March, 1938).

*R. W. SUTTON, B.Sc., F.I.C., Public Analyst.

*G. E. POOL, F.I.C., Sewage Works Analyst.

M. O. BERESFORD, Sewage Works Laboratory Assistant.

ANNIE R. McKAIL, M.B., Ch.B., D.P.H., Assistant Medical Officer.

E. R. CLARKE, E. A. HOLMES, L. M. JESSOP, E. M. MOORE, A. MASKREY,
E. M. WESTON, Municipal Certified Midwives.

ALEXANDER MORRISON, L.R.C.P. & S. (Ed.), L.R.F.P.S. (Glas.), Senior
Child Welfare Medical Officer.

MARY KENT, M.B., Ch.B. (Manchester),

‡ALEXANDRA M. MacCORMICK, M.B., Ch.B. (Glasgow), D.P.H. (Glas.
and Ed.).

JOHN STOKOE, M.D., B.S. (Dunelm), B.Hy., D.P.H. (Dunelm).

WILFRED LOMAX, M.D., Ch.B., D.P.H.

Assistant Medical Officers.

ARTHUR STAFFORD, L.D.S., R.C.S. (Eng.),
Dental Surgeon.

JOHN W. WILLIAMS, L.D.S. (Eng.)

IAN JAMES STEELE, L.D.S. (Glasgow).

FREDERICK GROSSMAN, L.D.S. (Belfast).

Assistant Dental Surgeons.

(b) E. M. GARDINER, (b) S. TAYLOR, (b) M. E. FORD, (a) M. C. UFF, (a) E. G. SHIPTON, (a) M. SOUTHERDEN, (a) E. McCRAE, (a) L. N. DOLAN, (a) M. WILD, (a) D. DAWSON, (a) M. H. WRIGHT, Health Visitors ; DORA SANTY, EDNA BRIGGS, MAVIS RICHARDS, Clerks.

(Qualifications of those marked (a) Certified Midwife, H.V., and Nursing Certificates ; (b) Certified Midwife and Nursing Certificates).

(d) G. E. GLADSTONE, (b) H. HOLLIES, (c) E. M. BELCHEM, (b) M. GOODING, (d) E. K. GLEDHILL, (a) W. BROWN, (d) L. L. W. COTTON, (e) M. LLOYD-JONES, School Nurses.

(Qualifications of those marked (a) Certified Midwife, Children's Nursing Certificates, General Training Certificates ; (b) Certified Midwife and General Training Certificates ; (c) Children's Training and H. V.'s Certificates ; (d) General Training Certificates ; (e) Certificates for Orthopædic Nursing, Massage and Medical Gymnastics).

F. WILSON, A.S.S.T., Speech Therapist.

W. LONNON, Chief Clerk ; WINIFRED E. BURROWS, F. E. OAKES, K. E. BRATBY, H. R. PERKINS, ELSIE WOOD, MARGARET THURGOOD, OLIVE TAYLOR, R. F. COLLINS, Clerks.

MARY WIBBERLEY, ALICE GLENN, MARGARET SIMS, Medical Attendants. LILIAN SHEPHERD, WINIFRED TAYLOR, EDNA BUTLER, MILLICENT M. MORGAN, Dental Attendants.

NANCY E. BOTTRILL, Medical and Dental Attendant.

EDITH HOLME, Caretaker (Central Clinic Premises).

W. H. WRAY, L.R.C.P., L.R.C.S., L.R.F.P.S., Tuberculosis Medical Officer and Deputy Medical Officer of Health.

C. PARRINGTON, Certified Midwife, and Nursing Certificates ; D. M. BICKERS, Certified Midwife, Tuberculosis Association and House-keeping Certificates ; Tuberculosis Nurses.

E. MORETON, F. WILDING, D. V. MOORE, Clerks.

R. J. O. TAYLOR, M.B., Ch.B., D.P.H., Resident Medical Supt., Borough Isolation Hospital and Sanatorium.

J. E. SCORAH, General, Fever, and Housekeeping Certificates, Matron ; M. HORNBY, General, Fever, Housekeeping and Midwifery Certificates, Deputy Matron ; Sister Tutor, Home Sister, Night Superintendent, Sisters (4), Nurses (37), Sub-Probationers (7) ; Domestic Staff (41).

E. ROE, H. J. WILLIAMS, Laboratory Assistants.

P. SMITH, L. GOODE, Clerks.

Storekeeper, Porters, Joiner, Engineer, and Gardeners, etc.

R. G. COOKE, M.D., Ch.B., M.R.C.S., L.R.C.P., D.C.O.G., Resident Medical Superintendent City Hospital.

J. C. C. DAWSON, M.D. (Toronto), Senior Assistant Medical Officer.

F. J. FOWLER, M.B., Ch.B., Senior Assistant Medical Officer.

L. O. WATT, M.D., N. MALLOCK, M.B., N. J. SMITH, M.B., B.A., B.Ch., B.A.O., A. MCGREGOR, M.B., B.S., A. GRACIE, M.B., Ch.B., R. P. K. COE, M.B., Ch.B.
Assistant Medical Officers.

P. BLENKHARN, Certified Midwife, Nursing Certificates, Matron ; V. R. M. CHAPMAN, Certified Midwife, Housekeeping Certificates, Assistant Matron ; Sister Tutor, Home Sister, Maternity Sister, Sisters (12), Nurses (76) Sub-Probationers (11), Messengers (2), Servants (47).
 J. E. STAMP, E. CHOLERTON, R. ROSE and B. MOORHOUSE, Clerks.
 Miss L. HOLFORD, Dispenser.
 M. M. JONES, M. E. ARMITAGE, Masseuses.
 Miss J. P. BAILEY, Laboratory Assistant.
 Storekeeper, Mortuary Attendant, Ambulance Driver, Porters, Gardeners, etc.

CONSULTANTS.

C. H. BAMFORD, M.B., Ch.B., D.O.M.S., Ophthalmic Surgeon.
 H. BARBER, M.D., B.S., F.R.C.P., M.R.C.S., Physician.
 G. S. CLARK-MAXWELL, M.B., B.S., Neurological Surgeon.
 N. L. EDWARDS, M.B., Ch.B., F.R.C.S., L.R.C.P., M.C.O.G., Gynæcologist.
 R. L. FLETT, M.D., Ch.B., F.R.C.S., L.R.C.P., Ear, Nose and Throat Surgeon.
 A. R. LAURIE, M.B., Ch.B. (Ed.), D.M.R.E. (Camb.), Radiologist.
 C. D. LOCHRANE, M.D., Ch.B., F.R.C.S. (Ed.), F.C.O.G., Gynæcologist.
 D. MACFARLANE, M.B., Ch.B., Anæsthetist.
 J. R. RATCLIFFE, M.R.C.S., F.R.C.S. (Eng.), L.R.C.P. (London),
 Orthopædic Specialist.
 W. G. ROSE, M.B., B.S., F.R.C.S., L.R.C.P., Surgeon.
 K. HEUGHAN, L.D.S., Dental Surgeon.

VENEREAL DISEASE MEDICAL OFFICER.

H. R. MORGAN RICHARDS, M.B., Ch.B.
 (employed by Derbyshire Royal Infirmary).

DISTRICT MEDICAL OFFICERS UNDER THE POOR LAW ACTS.

*LUCY M. ELSOM, M.R.C.S., L.R.C.P. (No. 1 District).
 *J. W. KING, M.B., B.S. (No. 2 District).
 *P. J. HONAN, M.B., B.Ch., B.A.O. (Belfast), (No. 3 District).
 *P. G. LEEMAN, M.B., B.Ch. (No. 4 District).
 *G. A. RUSSELL, M.R.C.S., L.R.C.P. (No. 5 District).
 *H. L. BECKITT, M.R.C.S., L.R.C.P. (No. 6 District).

PUBLIC VACCINATORS.

*J. W. KING, M.B., B.S. (Nos. 2 and 3 Districts).
 *P. G. LEEMAN, M.B., B.Ch. (No. 1 and 4 Districts).
 *G. A. RUSSELL, M.R.C.S., L.R.C.P. (No. 5 District).
 *H. L. BECKITT, M.R.C.S., L.R.C.P. (No. 6 District).

*Part-time Officers.

‡ Resident at the Borough Isolation Hospital.

Dr. L. O. Watt	terminated his duties on	4/3/38.
Dr. J. C. Dawson	„ „ „ „	20/4/38.
Dr. N. Mallock	„ „ „ „	30/4/38.
Dr. N. J. Smith	„ „ „ „	15/9/38.
Dr. A. McGregor	„ „ „ „	10/10/38.
Mr. K. Heughan	„ „ „ „	11/8/38.



PUBLIC HEALTH DEPARTMENT,

1, DERWENT STREET,

DERBY.

July, 1939.

*TO THE CHAIRMAN AND MEMBERS OF THE HEALTH AND
EDUCATION COMMITTEES.*

LADIES AND GENTLEMEN,

For those dealing with the administration of Public Health Departments 1938 has been a trying and difficult year and with 1939 almost half-way through it is apparent that we have not yet reached the crest of our troubles. The spanner which was thrown into our work was Air Raid Precaution. At first it looked as though it might be a fairly small thing which could, with a certain amount of overtime, be dealt with and then be left alone. Instead of that it seems that the more we have to deal with it the greater the burden becomes, until the stage is reached when the job for which we were appointed becomes neglected and this new type of work, about which the majority of us know very little, is being done neither to our own satisfaction nor to that of those who employ us.

I believe, and I am not alone in the belief, that provided we do not engage in war, air raid precautions will be a definite long-term policy. To carry out such a policy an adequate staff should be allocated to perform those duties and those duties alone. So far as the Health Services are concerned, we have separate departments for child welfare, tuberculosis, infectious diseases and so on, with their proper complement of professional and clerical staff and it is only reasonable that a similar arrangement should be made for A.R.P. instead of mulcting the existing sections of staff to the detriment of those departments. While I can speak feelingly of the Health side of the picture I know that the same position exists in other sections of the Corporation.

Throughout the year our principal slogan was—we want recruits for the medical services—hospitals, first aid posts and first aid parties. Meetings were held at which both local and outside speakers attended and numerous appeals were made through the press. Results were, however, exceedingly poor and the public refused to be stirred. Classes were arranged for those who did volunteer but the percentage of attendances was small.

In the meantime, with the assistance of the Borough Architect, fifteen first aid stations were earmarked and plans were prepared for their conversion into first aid and decontamination posts. Plans were made to evacuate the City Hospital, sending patients either to their own homes or to other hospitals in Derby, and retain it for air raid casualties. At the end of July all our plans regarding hospitals were washed out and we were informed that new schemes would be made.

Then came the September crisis ; and what a nightmare it was for us. We had no new hospital scheme. There were less than fifty trained people to man the first aid stations and act as stretcher bearers. We had no medical supplies for the stations. These were to have been provided by the Government but I managed to collect a nucleus of material from various agencies in the town. Finally, under the regulations, we were not allowed to have medical men at the stations although we had included them in our scheme. In defiance of this instruction I called a meeting of the doctors of the town, let them know the position as it stood, and asked for volunteers. Every man and woman present offered their services in whatsoever capacity I could utilise them and that was the only bright spot throughout the crisis. It is quite true that at the same period we received applications from about 150 individuals to assist at the first aid posts, but it must be realised that untrained people in these jobs, no matter how willing, would be more of a hindrance than a help and they could only be placed on our lists for first aid classes.

At the time of the crisis instructions were received that work required for the adaptation of first aid posts should be put in hand at once and by the end of the year this was carried out at the majority of the stations, so that in the event of any future emergency they would be going concerns within 24 hours.

By the end of the year things had definitely begun to move in London and we became pretty well drowned in reports, circulars and instructions. The new hospital scheme began to take shape. We converted the partially underground basement below Ward 2 at the City Hospital into a store for large stocks of goods which commenced to arrive from headquarters. Beds and bedding and medical stores both for hospitals and first aid posts began to arrive in large quantities and these had to be sorted out for their respective stations. The national recruiting campaign began to show some results but even now we are lamentably short of recruits particularly in the south and south-western parts of the town. One of the big difficulties we are up against under the present voluntary system is that time and time again we are told that although the person has volunteered for first aid service, "my first duty is to my ——" and in this blank can be put anything from schoolchildren and aged parents to employers. I had no idea that loyalty and conscientiousness were so prevalent. In fact we have so many provisos that it is doubtful if we could effectively man all the first aid stations. Under a voluntary system I do not know to whom one owes one's first duty. Is it to the family, the employer, the sick, or to the country or borough as a whole ? Things might be placed on a more satisfactory footing if first aid could be placed on a civilian territorial basis with distinctive uniform for those employed, a small gratuity, and an obligation to complete training and attend a minimum number of practices per annum. Until we can obtain some such system our figures of trained personnel cannot be regarded in any other light than paper figures.

This is a rambling account but so is A.R.P. and if only it shows members of the Council some of our difficulties it will have served its purpose. It might now be wise to give some account of the position as it is today (mid-1939):—

(1). FIRST AID PARTIES. These are made up of men trained in first aid and who have had instruction in gas contamination. Four parties are attached to each first aid station and it is their job to find the wounded on

the scene, apply first aid dressings and bundle them off in ambulances or cars to the first aid stations.

(2). **AMBULANCES.** Mr. Connor was appointed ambulance officer and he is responsible for the provision of casualty transport. For the most part ambulances will consist of various business vans fitted with moveable stretcher fittings, which can be adapted on short notice. Four of these ambulances will be attached to each first aid post. In addition four private cars will also be attached to each aid post for the purpose of carrying the first aid party to the scene of action and having deposited them there to assist in removing any slightly wounded cases to the aid stations or any other instructions given to them by the medical officer in charge of the aid station.

(3). **FIRST AID STATIONS.** Originally our scheme made provision for 15 first aid stations but at the suggestion of the Ministry of Health certain alterations were made and the following is the approved list with the medical officer in charge of each. As volunteers become trained they are allocated to the station nearest to their home and it may be of interest to show opposite each station the position as it stands today. The numbers include the first aid parties (16 men) who are attached to each station.

<i>Station.</i>	<i>Medical Officer.</i>		<i>Trained Volunteers.</i>	
			M.	F.
1. Children's Hospital ...	Dr. Hughes ...		11	37
2. Ashbourne Road School ...	Dr. Williams ...		6	13
3. Bemrose School ...	Dr. Shearwood ...		13	26
4. Temple House (School Clinic) ...	Dr. Dawson ...		6	24
5. Derbyshire Royal Infirmary	Dr. Kidman ...		13	22
6. Notts. Road School ...	Dr. H. C. Robertson		14	23
7. Boulton School ...	Dr. Beckitt ...		5	3
8. Clarence Road School ...	Dr. Revels ...		15	51
9. Brighton Road School ...	Dr. MacMillan ...		7	6
10. Village Street School ...	Dr. Clarke ...		17	16
11. Sinfen School ...	Dr. Patey ...		2	3
12. Nightingale School ...	Dr. Kirkpatrick ...		7	9
13. Municipal Sports Ground	Dr. J. C. Macfarlane		3	7

An arrangement has been made with the Derbyshire County Council for the Boulton School, Wyndham Street, to be utilised for the town and adjacent county area and in addition to the above figures there are volunteers in the county area who are being trained by the County Medical Officer of Health and these will amalgamate to form one personnel under Dr. Beckitt.

Arrangements are being made with firms to provide working parties in areas adjacent to some of these centres, such as Messrs. Aitons for the Nottingham Road district, Rolls-Royce for the Nightingale Road and Sports Ground districts, etc. Doctors in charge of the stations will be responsible for the efficiency of their staffs and monthly meetings will be held for that purpose, but it will be difficult to attain any measure of efficiency if volunteers do not make regular attendances. Casualties will be brought to these stations and there the majority will receive treatment and be sent home. More serious

cases will be seen by the doctor and transferred direct to hospital. It is incumbent on all citizens of the town to ascertain which is their nearest first aid station. Many cases with minor injuries will be able to reach their station on foot. It will be useless to rush off to a doctor's surgery in the hope of obtaining attention, because all the doctors will be on duty in some capacity.

It must also be appreciated that if there is a shortage of personnel at any station, causing a delay of treatment, the people of that district will only have themselves to blame for the deficiency. I trust that when the people understand the seriousness of these figures, a greater effort will be made to rally round the medical officer of their district and ensure an efficient service for themselves should it ever be required.

HOSPITAL SERVICES. In the event of any major calamity occurring in the town it is obvious to everybody that the number of beds available in the local hospitals would be totally inadequate and so preparations have been made to overcome such difficulties.

At the first sign of tension the hospitals would refuse to admit any cases which did not require urgent treatment and any patients whose treatment could be carried on at home without detriment to the patient would be sent home. This work would be done by ambulances and private cars. That in itself would not provide sufficient extra room and a certain number of cases who still required hospital treatment but were not seriously ill would be transported by 'buses—fitted up with stretchers, to institutions at such places as Ashbourne, Burton, and so on. Many of the children at the Children's Hospital would go to large private houses in the country which have been earmarked for that purpose. There might also be a decanting of maternity patients from the City Hospital to the Women's Hospital and Nightingale Home. Other City Hospital cases might be transferred to Boundary House sick wards and Kingsway House. In addition to all this movement of patients a very large number of extra beds will be erected both in existing wards and in hospital rooms which are not normally used as wards. The beds and bedding for this purpose are supplied by the Ministry of Health and large consignments of material have already arrived and are being stored on the premises.

All doctors who are in any way attached to the hospitals are being formed into teams which can be transferred to any local hospital as the need arises.

Existing nursing staffs will be quite inadequate to cope with the large number of extra beds and their present numbers will have to be more than doubled. For this purpose there is a Nursing Emergency Committee which has on its board all the matrons of the hospitals and we would like all ex-nurses who would be prepared to work in hospital to send their names to any of the matrons. That in itself would not meet the demand for personnel and a civil nursing reserve has been formed (present number of volunteers 345) of women without previous nursing experience. These people are receiving lectures and training at the various hospitals and Red Cross Establishments so that they may take their place if they are called upon to do so.

So much for our scheme of medical services in connection with Air Raid Precautions, but I must emphasise that we must continue to receive recruits if the service is to become efficient. There will always be reasons for the loss

of trained people due to illness, migration, etc., and we must have a flow of people to take their place. The voluntary system is on trial and it has only been partially successful. That measure of success will not provide Derby with a satisfactory service in an emergency.

In the body of the report written by members of the staff are a number of excellent and important remarks on matters of public health. To be quite frank, the majority of these I have not yet had time to study, but I trust that you will, when you can find some leisure moments, a phrase which I believe is becoming only a phrase as a result of the mass of work which members of committees are now expected to perform.

I am,

Ladies and Gentlemen,

Your obedient servant,

GORDON LILICO.



HEALTH REPORT

1938.

I--GENERAL.

STATISTICAL SUMMARY.

Area of Borough	8,133 Acres.
Elevation above sea level—	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="display: flex; align-items: center;"> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> highest, Burton Road ... </div> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> lowest, Alvaston Ward... </div> <div style="margin-right: 10px;"> <div style="display: flex; align-items: center;"> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> Market Place ... </div> </div> <div> <div style="display: flex; align-items: center;"> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> 325 ft. </div> <div style="display: flex; align-items: center;"> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> 126 ft. </div> <div style="display: flex; align-items: center;"> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> 157 ft. </div> </div> </div>
Population at Census, 1931	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="display: flex; align-items: center;"> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> Males ... </div> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> 68,893 </div> <div style="margin-right: 10px;"> <div style="display: flex; align-items: center;"> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> Females ... </div> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> 73,510 </div> </div> <div> <div style="display: flex; align-items: center;"> <div style="width: 10px; height: 10px; border: 1px solid black; margin-right: 5px;"></div> 142,403 </div> </div>
Estimated Population for 1938	139,000
Number of Houses (1931 Census)	34,875
„ Inhabited Houses at end of 1938 (according to Rate Books)	38,100
No. of Uninhabited Houses at end of 1938 (according to Rate Books, incl. prop. scheduled for demolition)	400
Number of Families or separate Occupiers (Census 1931)	35,949
Number of persons per acre at Census, 1921... ..	24·6
„ „ „ 1931... ..	20·0
Number of persons per House at Census, 1921	4·55
„ „ „ 1931	3·97
Rateable Value of the Borough (General Rate)	£965,315
Estimated amount realised by a Penny Rate	£3,630

1938.

Marriages	1,210	Rate per thousand population.	17·4
	Total. Males. Females.		
Live Births, legitimate	1,900	973	927
„ illegitimate	75	42	33
	—	—	—
Total ...	1,975	1,015	960
Births (notified) ...	1,959	—	—
Still Births	85	49	36
			Birth-rate ...
			14·2
Deaths	1,613	855	758
Death Rate adjusted by the Comparability Factor (1·04) supplied by the Registrar General			
Percentage of Total Deaths occurring in Public Institutions			
Excess of Births registered over Deaths			
Deaths from Puerperal Causes—			
	Deaths.		Rate per 1,000 total (live and still) births.
Puerperal Sepsis	—		—
Other Puerperal Causes	2		·97
	—		—
Total	2		·97
Deaths of Infants under one year of age—			
Legitimate, 110. Illegitimate, 11. Total, 121.			
Death Rate of infants under one year of age per 1,000 live births—			
Legitimate, 57·9. Illegitimate, 146·7. Total, 61·3.			
Deaths from Measles (all ages)			2
„ Whooping Cough (all ages)			—
„ Diarrhoea (under 2 years of age)			13

BIRTHS.

Birth-rate, 1938 14.2

The Births registered during the year numbered 1,975, as compared with 2,065 in 1937.

DEATHS.

	Rate per 1,000 population.
Zymotic Diseases	24 0.17
Tuberculosis of Respiratory System	77 0.55
Other Tuberculous Diseases	13 0.09
Respiratory Diseases	108 0.77

DEATH RATES :—	Rate per 1,000 population.
England and Wales	11.6
126 County Boroughs and great towns (including London) ...	11.7
148 smaller towns (Resident Populations, 25,000—50,000 at Census, 1931)	11.0
London Administrative County	11.4

DEATHS.

Death-rate, 1938 11.6

The total number of Deaths registered during the year was 1,992 as compared with 2,130 in 1937 ; of these 1,992 deaths, 409 were strangers, and there were 30 deaths of Derby residents registered outside the Borough, making a net total of 1,613. The net death-rate, therefore, from all causes was 11.6. The death-rate adjusted by the Comparability Factor (1.04) supplied by the Registrar General being 12.1.

The following analysis shows the distribution of deaths to ages of the Derby residents :—

Under 1 year	121
1 and under 5 years	27
5 and under 45 years	220
45 and under 65 years	448
65 and under 75 years	397
75 and over	400
Total	1,613

BURIALS.

The total burials in the Derby Cemeteries for the year 1938 was 1,712, made up as follows :—

1,589 Ordinary Burials.
123 Still-born.
<hr/> 1,712

Principal Causes of Death, 1938, COMPARISON WITH 1937.

<i>Cause of Death.</i>	<i>Deaths in 1938.</i>	<i>Increase.</i>	<i>Decrease.</i>
Heart Disease	432	—	12
Cancer	201	1	—
Other Circulatory Diseases ...	122	15	—
Cerebral Haemorrhage	79	—	22
Respiratory Tuberculosis	77	—	—
Old Age	76	—	10
*Prematurity, etc.	75	—	10
Pneumonia	67	—	24
Violent Causes (including Suicide)	62	—	15
Nephritis	54	—	6
Diabetes	28	—	5
Bronchitis... ..	28	—	17
Other Digestive Diseases	28	7	—
Peptic Ulcer	14	—	6
Other forms of Tuberculosis ...	13	2	—
Other Respiratory Diseases ...	13	2	—

* Including Congenital Defects and Atrophy, Debility and Marasmus.

Inquests held during 1938.—These numbered 133—84 males and 49 females.

Mortuary.—Dead bodies received during the year, 125. Post mortem examinations, 239.

Infantile Mortality.—Of the 121 deaths of babies under the age of one year, 65 occurred during the first month, and of this number 81·5 per cent. (viz., 53) took place during the first week of life.

Excessive Mortality during the year.—Cancer was responsible for 201 deaths during 1938, this being an increase of 1 as compared with 200 in the previous year. The average mortality in the quinquennium 1914-18 was 120·4, while that of the quinquennium 1934-38 was 203·0. Heart Disease shows an increase of 11 deaths over the yearly average for the preceding five years, and a decrease of 12 as compared with 1937.

DEATHS FROM VIOLENCE.

	1938	1937.
Suicide	14	17
Other Forms of Violence ...	48	60

The following table gives a comparative summary of the Deaths from Other Forms of Violence during 1938 and 1937 :—

Street Accidents.	1938.	1937.
Knocked down by Motor Traffic	10	6
Pedal Bicycle and Motor Vehicle Collisions	4	1
Collisions between Motor Vehicles, etc.	3	3
Thrown from Motor Vehicles	1	2
Knocked down by Pedal Cyclist	1	—
Run over by horse-drawn dray	—	1
Fall from Pedal Cycle	—	1
Falls	3	—

Home Accidents.

Suffocated in Perambulator (Accidental)	1	—
Poisoning	1	—
Burns, Scalds, etc.	4	4
Asphyxia, Inattention at Birth (Accidental)	2	3
Falls, Fractures, etc.	8	9
Suffocated in bed	—	1
Suffocated in own vomit	—	1
Overlaying	—	2
Asphyxia, obstruction by Mucus	—	1

Procured Abortion	2	1
---------------------------------	---	---

Drowning	2	4
------------------------	---	---

Homicide	1	2
------------------------	---	---

Accidents at Work.

Hit by stone whilst Blasting Operations in a Quarry	—	1
Fall from Ladder	—	2
Drowned when Tractor overturned into Canal	—	1
Run over by Railway Carriage or Wagon	—	2
Crushed by a Coal Bunker	1	—
Crushed by Steel Girder	—	1
Falls	—	2

Other Accidents.

Falls, Fractures, etc.	3	6
Fall whilst Rock Climbing	—	1
War Wounds	—	2
Fall whilst riding in a Steeplechase	1	—

Causes of, and Ages at Death, during 1938.

CAUSES OF DEATH.	DEATHS IN OR BELONGING TO WHOLE DISTRICT AT SUBJOINED AGES.													TOTAL DEATHS IN PUBLIC INSTITUTIONS.	
	All Ages.	Under 1 year	1 & under 5 yrs.	5 & under 10 yrs.	10 & under 15 yrs.	15 & under 20 yrs.	20 & under 35 yrs.	35 & under 45 yrs.	45 & under 55 yrs.	55 & under 65 yrs.	65 & under 75 yrs.	75 & over.	Residents.	Non-Residents.	
Typhoid and Paratyphoid															
Fevers	2	...	...	...	...	...	1	...	1	...	...	...	2	1
Measles	2	1	1	...	...	...	...	...	...	...	...	...	...	1
Scarlet Fever	1	...	1	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria	6	...	...	5	1	...	...	...	...	...	...	...	6	3
Influenza	10	...	...	...	...	...	1	1	2	2	4	...	2	...
Encephalitis Lethargica	1	...	...	...	...	...	...	1	...	...	...	...	...	...
Cerebro Spinal Fever	2	...	1	...	...	...	...	1	...	...	...	...	2	...
Tuberculosis of Respiratory															
System	77	...	1	...	1	4	24	19	14	9	4	1	30	3	
Other Tuberculous Diseases	13	...	3	...	...	2	1	2	2	1	1	1	10	9
Syphilis	10	...	...	...	...	...	...	3	3	2	2	...	9	...
General Paralysis of Insane,															
Tabes Dorsalis	9	...	...	...	...	...	...	1	2	5	...	1	6	...
Cancer, Malignant Disease	201	...	...	...	...	...	4	12	28	59	65	33	98	36
Diabetes	28	...	...	...	...	...	...	3	2	5	10	8	20	9
Cerebral Hæmorrhage, etc.	79	...	...	...	...	...	...	...	8	13	27	31	38	4
Heart Disease	432	...	...	...	1	4	10	7	47	70	145	148	142	24
Aneurysm	1	...	...	...	...	...	...	...	1	...	...	...	1	...
Other Circulatory Diseases	122	...	...	...	...	...	1	1	13	25	42	40	42	9
Bronchitis	28	4	...	...	...	...	...	1	2	3	6	12	13	2
Pneumonia (all forms)	67	13	8	2	1	...	6	7	6	13	7	4	38	21	
Other Respiratory Diseases	13	...	...	...	...	...	1	1	1	4	4	2	6	5
Peptic Ulcer	14	...	...	...	...	...	...	1	3	5	4	1	8	10
Diarrhœa	16	13	1	...	...	...	1	...	...	1	...	...	12	10
Appendicitis	9	...	...	...	1	1	2	1	3	1	...	...	8	17
Cirrhosis of Liver	5	...	...	...	...	...	...	...	2	1	2	...	4	1
Other Diseases of Liver, etc.	6	...	...	...	...	...	...	...	1	2	2	1	4	4
Other Digestive Diseases...	25	1	4	1	2	...	...	2	4	5	4	2	20	19
Acute & Chronic Nephritis	54	...	...	...	...	1	6	6	5	9	18	9	34	13
Puerperal Sepsis ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Puerperal Causes	2	...	...	...	...	...	1	1	...	...	...	...	2	8
Congenital Debility, Mal-															
formation, etc. and															
Premature Birth	75	75	...	...	...	...	...	...	...	...	...	...	57	49
Senility	76	...	...	...	...	...	...	...	...	...	5	71	57	3
Suicide	14	...	...	...	...	...	...	3	7	3	1	...	2	4
Other Violence	48	3	3	5	3	...	6	4	5	6	4	9	34	36	
Other Defined Causes	163	11	4	4	7	4	21	6	19	22	39	26	109	75	
Causes ill-defined or un-															
known	2	...	...	...	...	...	...	...	...	1	1	...	2	1
Totals	1613	121	27	17	17	16	86	84	181	267	397	400	818	377	

DEATHS IN OR BELONGING TO LOCALITIES (AT ALL AGES).																			
Causes of Death.		Total.	Abbey.	Alvaston.	Arbor.	Bab.	Becket.	Bridge.	Castle.	Dale.	Derwent.	F. Gate.	K. Mead.	Litch.	Norman.	Osmas.	Pear Tree.	Rowditch.	Strangers.
Enteric Fever	...	2	...	...	...	...	1	...	1	...	...	...	1	...	...	...	...	...	1
Measles	...	2	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1
Scarlet Fever	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria	...	6	...	...	...	2	...	...	...	...	1	...	...	2	...	...	1	...	...
Influenza	...	10	...	...	2	3	...	...	...	...	1	...	1	...	...	...	3	...	...
Encephalitis Lethargica	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Meningoocoeal Meningitis	.....	2	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis of Respiratory System	...	77	4	8	3	6	2	1	7	4	3	4	5	3	7	9	7	4	3
Other Tuberculous Diseases	...	13	2	1	3	1	1	...	...	...	1	1	...	...	2	1	...	...	9
Syphilis	...	10	1	...	1	...	...	...	...	...	...	...	3	2	...	2	...	1	...
General Paralysis of Insane	...	9	1	...	...	...	...	1	...	1	2	1	1	...	1	...	...	1	...
Cancer	...	201	14	11	8	11	19	7	13	14	17	11	16	15	7	10	9	19	40
Diabetes	...	28	2	3	3	7	...	2	2	2	3	2	6	1	1	4	1	1	9
Cerebral Hæmorrhage	...	79	5	5	5	7	3	2	2	7	3	9	6	6	7	3	4	5	5
Heart Disease	...	432	25	31	22	25	19	17	23	41	34	33	33	25	19	17	35	33	34
Aneurysm	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Circulatory Diseases	...	122	5	11	4	10	8	9	3	11	6	9	9	9	4	7	8	9	11
Bronchitis	...	28	2	2	3	2	...	...	3	1	2	...	1	2	4	1	2	3	2
Pneumonia...	...	67	5	8	1	1	2	2	8	2	3	9	10	3	1	10	1	1	22
Other Respiratory Diseases	...	13	2	1	1	...	1	1	...	2	1	...	1	2	...	1	...	...	6
Peptic Ulcer	...	14	...	...	1	3	...	1	1	2	1	...	...	3	...	2	1	...	11
Diarrhœa (under 2 years)	...	13	2	...	1	...	...	...	...	2	1	1	1	1	...	2	1	1	10
Appendicitis	...	9	...	...	...	...	1	1	...	...	...	1	2	...	2	...	...	...	17
Cirrhosis of Liver	...	5	...	...	1	1	...	2	1	...	1	...	...	...	...	...	...	...	2
Other Diseases of Liver...	...	6	...	...	...	1	...	...	1	...	...	1	2	...	1	...	...	...	4
Other Digestive Diseases	...	28	...	2	4	1	...	1	3	...	3	2	2	1	4	2	2	1	19
Nephritis	...	54	2	3	7	4	2	2	3	1	5	3	3	1	2	5	4	7	13
Puerperal Sepsis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Puerperal Causes...	...	2	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	8
Congenital Debility, Malformation, etc., and Premature Birth	...	75	3	8	2	4	2	2	3	4	8	2	5	3	5	11	7	6	50
Senility	...	76	6	7	3	3	6	9	6	...	5	6	8	2	5	...	4	6	3
Suicide	...	14	...	...	2	...	...	2	1	3	1	2	1	...	2	...	...	...	5
Other Deaths from Violence	...	48	2	3	1	2	...	2	3	1	6	4	2	5	3	9	5	...	42
Other Defined Causes	...	163	11	9	13	5	6	6	12	8	13	11	13	9	8	13	15	11	78
Causes ill-defined or unknown	...	2	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...	1
Totals	...	1613	96	115	91	93	73	71	96	106	121	113	128	95	86	110	110	109	409

DERBY RAINFALL, 1938.

We are indebted to Messrs. J. Davis & Son for the following Table :—

According to the return of rainfall experienced at Derby during the past year, and taken by Messrs. John Davis & Son, All Saints' Works, there were 166 rainy days in 1938. The amount of rain which has fallen is 27·17 inches, which is 1·57 inches below that of the average of the twenty-one years, 1917-1937. The detailed figures are as under :—

DERBY.					DUFFIELD.					Average for Derby, 1917-1937 inclusive.
		Inches.		No. of rainy days.		Inches.		No. of rainy days.		
January ...	...	3·46	...	22	...	4·08	...	23	...	2·58
February ...	...	0·96	...	12	...	1·14	...	11	...	2·06
March ...	...	0·37	...	4	...	0·28	...	4	...	1·80
April ...	...	0·13	...	2	...	0·18	...	2	...	2·17
May ...	...	1·96	...	12	...	2·07	...	12	...	2·43
June ...	...	1·58	...	9	...	1·72	...	11	...	1·90
July ...	...	4·15	...	17	...	4·21	...	18	...	2·82
August ...	...	1·51	...	14	...	1·73	...	17	...	2·75
September ...	...	3·61	...	15	...	3·65	...	18	...	2·50
October ...	...	2·56	...	18	...	3·32	...	19	...	2·72
November...	...	2·99	...	18	...	3·62	...	20	...	2·44
December ...	...	3·89	...	23	...	4·56	...	25	...	2· 57
		—		—		—		—		—
		27·17	...	166	...	30·56	...	180	...	28·74
		—		—		—		—		—

Laboratory Facilities.

The examination of throat swabs, specimens of sputum, etc., is carried out at the Borough Laboratory, Isolation Hospital. Examinations of specimens of Cerebro-spinal fluid, blood for Widal's reaction, etc., inoculation experiments and more elaborate investigations, as well as the Wassermann test, are made at the County Council Bacteriological Laboratories, in St. Mary's Gate, at an agreed charge per specimen.

Samples of water are analysed either by the Borough Analyst at the County Council Analyst's Laboratory or by the Analyst at the Borough Sewage Works Laboratory, Spondon.

Milk and foodstuffs are also examined by the Borough Analyst as above.

Bacteriological Examinations and Inoculation Tests of Milk are carried out at the County Council Bacteriological Laboratories,

POOR LAW MEDICAL OUT-RELIEF.

Mr. R. Grantham, Clerk to the Public Assistance Committee, reports as follows :—

The Borough is divided into six Medical Relief Districts, as follows :—

District.	Wards.	Medical Officer.	Population at Census, 1931.
No. 1	Arboretum, Dale, Normanton.	Dr. Margaret Elsom	24,630
No. 2	Abbey, Babington, Becket.	Dr. J. W. King	23,711
No. 3	Bridge, Derwent, King's Mead.	Dr. P. J. Honan	26,434
No. 4	Litchurch, Osmaston, Pear Tree.	Dr. P. G. Leeman	29,107
No. 5	Friar Gate, Rowditch.	Dr. G. A. Russell	18,607
No. 6	Alvaston, Castle.	Dr. H. L. Beckitt	19,914

Each District Medical Officer has a surgery within their respective District.

Persons requiring Medical Relief must apply to the Relieving Officer for a Medical Order. This is taken to the Medical Officer, who sees the patient and prescribes the necessary medicines. These are dispensed at the Dispensary, Becket Street, where there is a specially-appointed Pharmacist. Medical Orders are available for four weeks, when a new application is made to the Relieving Officer for continuance.

The "open choice" system of medical relief has not been introduced in any of the districts.

There are six Medical Officers and none of them devotes his whole time to public health service.

Ambulance Facilities.

(a) There are two Motor Ambulances kept at the Borough Isolation Hospital for utilisation for Infectious cases and Tuberculosis cases, when necessary.

(b) One Motor Ambulance is kept at the Fire Station and is available for the removal of General, Medical, Surgical, Maternity, and Accident cases. The Fire Brigade is responsible for its running, and a small charge is made for the use of same.

One Motor Ambulance is kept at the City Hospital, and is used for the removal of cases to that institution.

It is known that four large firms (British Celanese Ltd., London, Midland and Scottish Railway Co.-C.M.E. and C. & W. Depts., Rolls-Royce Ltd., Trent Motor Traction Co. Ltd.) in the town have Motor Ambulances which are used in the case of accidents and illness to their workpeople. In addition, the St. John Ambulance and British Red Cross have three ambulances,

CLINICS AND TREATMENT CENTRES.

Name.	Situation.	By whom provided.	Days and times held.
Maternity and Child Welfare Centres.			
Alvaston ...	Carnegie Library, London Rd.	Local Authority. Free Library Committee, without charge to Health Committee Rose Hill Methodist Church at fee of 30/- weekly	Monday, 2—4 p.m.
Rose Hill ...	Rose Hill Methodist Church, Normanton Road		Tuesday, 10 a.m.— 12 noon, & 2—4 p.m. Thursday, 2—4 p.m.
Nottingham Road ...	Nottingham Rd. Council School		Wednesday, 2—4 p.m., & Thursday, 10 a.m. to 12 noon.
Nightingale Road ...	Nightingale Rd. School	Education Committee's premises	Wednesday, 10—12 noon & 2—4 p.m.:
Green Street ...	Green Street	Education Committee's premises	Tuesday, 2—4 p.m. & Friday, 2—4 p.m.
St. Giles', Normanton ...	St. Giles' Schoolroom, Normanton	St. Giles' Church, Normanton, at a fee of 10/- weekly	Thursday, 10 a.m.— 12 noon
Dean Street ...	Chapel, Dean Street	Dean St., M. Mission at fee of 10/- weekly	Friday, 2—4 p.m.
Trinity Street ...	Rear of Nightingale Nursing Home, London Road	Voluntary Association. Derby and Derbyshire Nursing and Sanitary Assoc. (payment made by Corporation under L.G.A., 1929) Health Committee's premises	Friday, 2—4 p.m.
Ante-Natal Clinics.			
City Hospital ...	Uttoxeter Road		Tuesday, 2.45 p.m. Thursday, 2.45 p.m.
Trinity Street ...	Rear of Nightingale Nursing Home, London Road	Derby and Derbyshire Nursing and Sanitary Assoc. (payment made by Corporation under L.G.A., 1929)	In-patients—Tuesday, Wednesday, Thursday and Friday, 10 a.m. Out-patients—First and third Wednesday in month, 3 p.m.

CLINICS AND TREATMENT CENTRES—continued.

Name.	Situation.	By whom provided.	Days and times held.
Dental Clinic (for Nursing Mothers).	Temple House, Mill Hill Lane	Education Committee's premises	As required.
School Clinics.			
For Minor Ailment Treatmt.	Central Clinic, Mill Hill Lane	Education Committee's premises	Mon., Weds., Thurs., Sat. morn.
"	Green Street	"	Mon., Thurs. afterns.
"	Pear Tree Council School	"	Tues. & Fri. mornings.
"	Brighton Rd. Council School	"	Mon., Thurs. mornings.
For Minor Ailment Treatmt.	Firs Estate Council School	"	Tues. & Fri. mornings.
For Minor Ailment Treatmt.	Nightingale Road School	"	Tues., Fri. afterns.
"	Nottingham Rd. Council Sch.	"	Tues., Friday mornngs.
For Minor Ailment Treatmt.	Traffic Street School	"	Tues., Fri. afternoons.
For Minor Ailment Treatment (Nursery children only)	Central Nursery School	"	Tues., Fri. afterns.
†*Dental Treatment ...	Central Clinic, Mill Hill Lane	"	Daily, morn. & aftern.
†*Ear, Nose, and Throat ...	"	"	Friday morning
†*Eye ...	"	"	Tues. & Weds. morns. Mon. & Thurs. afterns
†*Skin ...	"	"	Wednesday afternoons.

*Also available for children of pre-school age.

†By appointment.

CLINICS AND TREATMENT CENTRES—continued.

Name.	Situation.	By whom provided.	Days and times held.
†Consultation ...	Central Clinic, Mill Hill Lane	Education Committee premises	Wed., Sat. morns. & Monday afternoon.
*†Ultra-Violet Ray ...	Rear of Central Clinic, Mill Hill Lane	" "	Each morning and afternoon, except Tues., Weds., Fri. afternoons.
" "	Green Street Nursery Sch.	" "	Mon., Thurs. morns.
*†Orthopaedic ...	Central Clinic, Mill Hill Lane	" "	Tues., Fri. afterns.
			Each morning & afternoon, except Mon. & Thurs. afternoons.
*†Orthoptic	" "	Derbyshire Royal Infirmary by arrangement.	
†Speech	" "	Education Committee premises	Mon., Tues., Thurs. & Fri. afternoons.
† " "	Nightingale Road School Green Street Clinic	" "	Tues., Fri. mornings.
		" "	Mon., Thurs. mornings.
Tuberculosis Clinic			
Clinics ...	93, Green Lane,	Health Committee's premises	Monday mornings. Tuesday mornings. Wednesday mornings. Wednesday afternoons. Thursday mornings. Friday, mornings.
Venereal Diseases.			
Clinics ...	Derby and Derbyshire Royal Infirmary, London Road	Derby & Derbyshire Royal Infirmary (cost apportioned between Derby Borough and Derbyshire County Council on basis of Out-patient attendances)	Mon. 6—8 p.m. (males) Wed. 6—8 p.m. (males) Sat. 11.30 a.m.—1.30 p.m. (males) Mon. 3—5 p.m. (femls.) Thrs. 6—8 p.m. (femls)

*Also available for children of pre-school age.

†By appointment.

LEGAL SUMMARY.

Local Acts (containing Sanitary Provisions).

The Derby Waterworks Acts, 1848, 1868, 1873.

The Derwent Valley Water Acts, 1899, 1901, 1904 and 1909.

The Derby Improvement Act, 1879, Part IV.

The Corporation Acts, 1877 (Sec. 60), 1890, 1901, 1913, 1927, 1929 (55,39,40).

Acts Adopted.

Public Health Acts Amendment Act, 1890, Part III. (Secs. 28, 29, 30, 31, 34, 35, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 48, 49 and Sec. 50 as amended by P.H. Act, 1936) came into operation 20th September, 1899.

Public Health Acts Amendment Act, 1890, Part II., came into operation 12th December, 1904.

Public Health Acts Amendment Act, 1907 (Secs. 19, 22, 28, 30, 31, 33, 46, 53, 54, 76, 77, 93 and 95), came into operation 3rd March, 1910, and Secs. 80, 81, 87, 88, 89 and 90 came into operation 4th January, 1910.

Public Health Acts Amendment Act, 1890, Part V., came into operation 7th February, 1921.

Public Health Act, 1925, Secs. 13, 15, 18, 22, 23, 24, 25, 26, 27, 28, 30, 31, 32, 33, 35, came into operation 15th March, 1926.

Slaughter of Animals Act, 1933 (Section 1—as to sheep, ewes, wethers, rams and lambs), came into operation 1st January, 1934.

Bye-laws, Regulations and Orders.

1930. Slaughter-houses.

1927. New Streets and Buildings.

1930. Common Lodging Houses.

1891. Nuisances (bye-laws 1 and 4), additional (only apply to Borough as it existed prior to Derby Corporation Act, 1927).

1892. Street Stop Taps.

1898. Dairies, Cowsheds and Milkshops.

1930. Markeaton Baths.

1930. Houses Let in Lodgings.

1930. Public Baths.

1904. Regulations as to Branch Sewers in Main Drainage Area.

1907. Expectorating in Public Places, etc., Banana Skins, etc.

1908. Factory and Workshop Statutory Rules and Regulations.

1910. Underground Rain-water Cisterns (as amended by 1930 bye-laws).

1911. Confirming Order of L.G.B. under Sec. 51 P.H.A.A. Act, 1907, declaring certain trades to be offensive.

1911. Regulations as to Communications between Drains and Sewers.

1912. The Derby (No. 1) Shops Order, 1912.

1913. The Derby (No. 2) Shops Order, 1913.

1913. The Derby (No. 3) Shops Order, 1913.

1913. Regulations as to Communications between Drains and Sewers in Main Drainage Area.

- 1914. Additional General Rules for the Government of the Mental Hospital.
- 1916. For the Good Rule and Government of the Borough and for the Prevention of Nuisances.
- 1917. Spitting on Footways.
- 1919. The Derby Shops (No. 4) Order, 1919.
- 1919. The Derby Shops (No. 5) Order, 1919.
- 1921. Tents, Vans, Sheds, and similar structures used for human habitation (as amended by 1930 bye-law).
- 1928. Nursing Homes.
- 1930. Bass's Baths.
- 1930. Pleasure Grounds.
- 1930. For Preventing Waste, etc., or Contamination of Water.
- 1935. Prevention of the Fouling of Footways by Dogs.
- 1935. Employment of Children and Street Trading (as amended by 1938 bye-law which came into operation on 1st July, 1938).

II--MATERNITY AND CHILD WELFARE.

REPORT BY

DR. A. MORRISON, Senior Child Welfare Medical Officer.

INCLUDING REPORTS BY

DR. McKAIL, Medical Supervisor of Midwives, etc.

AND

MR. A. STAFFORD, Senior School Dental Officer.

MUNICIPAL MIDWIFERY SCHEME.

The Domiciliary Midwifery of the Borough has been undertaken by:—

- (1) Six Municipal Midwives.
- (2) Midwives from the Royal Nursing Institute.
- (3) Two Midwives in private practice.

The town is divided into six areas, in each of which a municipal midwife practises. Choice of midwife is allowed, and a patient may engage a midwife in any district, provided the distance from the midwife's home is not too great. The midwives from the Royal Nursing Institute practise in all areas. The total number of cases attended by the municipal midwives was 402, which averages 67 per midwife. The number attended by any one midwife varied from 92 to 36.

Two midwives attended a refresher course at the City Hospital and were in residence for a period of one month. The municipal midwives relieve each other, as far as possible. Arrangements have been made with the Royal Nursing Institute for further relief, and for the nursing of infectious and contact cases. During the year sterilised outfits were provided, two for each case for use at delivery and during the lying-in period.

All primiparous women are examined by a doctor at least once during their pregnancy, and the midwives do not find any difficulty in persuading these to attend their doctors. But it is very different with the multiparae, as most of them refuse to attend a doctor for examination unless there is something definitely wrong.

The municipal midwives attended 402 confinements including non-residents and medical aid was sought in 284 cases.

97 on account of expectant mother.

156 on account of mother.

31 on account of infant.

<i>District.</i>	<i>Total cases attended by Midwife (including strangers).</i>	<i>Cases attended as Maternity Nurse.</i>	<i>Medical Aid Forms sent.</i>	<i>Still Births.</i>	<i>Neo-Natal Deaths.</i>	<i>Cases of Puerperal Pyrexia.</i>	<i>Cases of Ophthalmia Neonatorum</i>
A.	60	2	13	—	1	—	—
B.	92	11	89	3	1	2	2
C.	36	5	29	2	1	—	1
D.	81	14	23	1	1	2	—
E.	74	1	78	6	5	4	2
F.	59	6	52	1	—	2	—
	402	39	284	13	9	10	5

There were no maternal deaths.

Midwives.

109 midwives gave notice of intention to practise within the Borough during 1938. 81 were attached to institutions (26 at the Derby Royal Nursing Institution, 1 at the Queen Mary Nursing Home, 31 at the City Hospital, 2 at the Poor Law Institution, 17 at the Women's Hospital, 2 at the Borough Isolation Hospital, and 2 at Nursing Homes. 19 were connected with the Health Department (including two School Nurses) and 9 practised privately (five of these being resident outside the Borough).

Of the 9 midwives practising privately in the Borough, four did not attend any cases in the Borough during the year, the remainder attended 77 cases (72 births and 5 stillbirths). Medical aid was sought in 22 cases, 12 on account of the mother and 10 on account of the infant. In addition, these midwives acted as maternity nurses at 6 cases. Two cases of ophthalmia neonatorum were notified in their practices. 46 visits to midwives were paid and 12 interviews.

Ante-Natal Clinics.**CITY HOSPITAL.**

734 women made 3,958 attendances during the year.

VOLUNTARY.—NURSING ASSOCIATION AND NIGHTINGALE HOME.

Expectant Mothers attended—

900 made 3,522 attendances at 225 Clinics.

Post-Natal Clinics.**MUNICIPAL—****City Hospital.**

176 women made 177 attendances during the year.

VOLUNTARY.**Nightingale Home only.**

329 women made 329 attendances at 47 Clinics.

DENTAL SERVICES.

Report by Mr. A. Stafford.

Child Welfare (Pre-school Children). These cases were referred from Child Welfare Clinics by Medical Officers or sought treatment by direct application, and were treated at the Temple House Clinic along with school children, no special sessions being set aside for them. The treatment consisted almost entirely of extractions of temporary teeth with the use of Nitrous Oxide anaesthetic, there being little or no opportunity of carrying out any method (e.g. Silver Nitrate) of conservation of defective temporary teeth not requiring to be extracted. The condition of the teeth of these pre-school children—as indeed of many of the five-year-old group of school entrants—indicates that there is much yet to be learnt and done with regard to the prevention of early caries in the child long before school age. For the present it may at least be said that any form of inspection and treatment on the pre-school child prepares a useful foundation upon which any subsequent scheme of treatment such as School Dentistry can be built.

Nursing Mothers. Cases were referred from Child Welfare Centres by Medical Officers, and were treated at the Temple House Clinic. There are no special days for their attendance, appointments being made as required. In addition to extractions under Nitrous Oxide and Oxygen anaesthetic, treatment included the provision of dentures. The system of putting out the mechanical construction of these is working quite satisfactorily and includes those supplied to cases under other headings.

Dental Clinic. Held at Temple House, Mill Hill Lane. Particulars of treatment given to expectant and nursing mothers are as follows :—

	Nursing Mothers.	Child Welfare.	Tuberculosis Clinic.	ISOLATION HOSPITAL.		CITY HOSPITAL.					Miscellaneous.	TOTALS.
				In-patients.	Staff.	Ante-Natal.	Public Assistance.	In-patients.	Out-patients.	Staff.		
No. of cases who attended Clinics	58	454	22	23	40	515	59	61	3	9	40	1,284
No. of cases actually treated	57	438	4	22	37	363	56	56	3	8	25	1,069
No. of cases to whom advice only was given	1	16	18	1	3	152	3	5	—	1	15	215
No. of attendances made at Clinics	96	512	27	27	51	720	91	85	6	15	66	1,696
No. of Fillings	—	5	—	—	11	7	—	—	—	7	26	56
No. of Extractions	213	1175	3	63	56	728	96	282	7	13	29	2,665
No. of General Anæsthetics	54	478	—	19	27	343	19	39	3	7	21	1,010
No. of Local Anæsthetics...	1	—	1	—	1	—	14	13	2	1	1	34
No. of Denture patients	4	—	1	—	—	—	5	2	—	1	—	13
No. of Dentures constructed	6	—	2	—	—	—	10	4	—	1	—	23
No. of Dentures repaired	1	—	—	—	—	2	15	1	—	—	—	19
No. of Scalings, Dressings, etc.	20	—	7	—	6	58	19	10	—	3	17	140

PUERPERAL PYREXIA.

Details of cases of Puerperal Pyrexia which have occurred during 1938 will be found in the Section dealing with Infectious Diseases.

All cases of Puerperal Pyrexia occurring at home have been investigated and records of cases occurring in Institutions have been completed by the Medical Practitioner in charge of the case.

Maternal Mortality. The Maternal Mortality rate for 1938 was 0.97 per 1,000 total births (live and still). The form of Questionnaire required by the Ministry of Health has been filled up regarding all Maternal Deaths of Derby residents.

<i>Age.</i>	<i>Cause of death.</i>	<i>Institution.</i>	<i>Children left.</i>
29	Pelvic Thrombosis. Eclampsia. Pregnancy (childbirth 26/7/38)	D.C.H.	—
44	Anaemia and shock. Ruptured Ectopic Gestation. Fatty Infiltration of Heart	D.R.I.	6

Births.

2,964 notifications were received during 1938 under the Notification of Births Act, 1907. Of these, 1,959 were live births and 85 were still-births relating to Derby residents. 852 were live births and 68 were still-births relating to non-residents. The details were as follows :—

	<i>Derby Residents.</i>		<i>Non-Residents.</i>	
	<i>No.</i>	<i>Percent- age.</i>	<i>No.</i>	<i>Percent- age.</i>
Live Births.				
Notified by Midwives	756	25.5	24	0.8
Notified by Doctors	98	3.3	3	0.1
Notified from Institutions by Midwives	996	33.6	687	23.2
Notified „ „ „ Doctors	109	3.7	138	4.65
Still-Births.				
Notified by Midwives	26	0.88	1	0.03
Notified by Doctors	2	0.07	—	—
Notified from Institutions by Midwives	24	0.8	23	0.77
Notified „ „ „ Doctors	33	1.1	44	1.5
Totals	2,044	68.95	920	31.05

1,162, or 56.8% of total births relating to residents took place in Institutions. 1,975 births were registered.

STILL-BIRTHS. 153 Still-Births were notified (79 being notified by Medical Practitioners and 74 by Midwives). 85 were in respect of Derby residents and 68 non-residents. There were 123 burials of still-born children in the Derby cemeteries during the year. 85 still-births were registered in respect of Derby residents, eight being illegitimate. Percentage of still-births to live births registered was 4.3.

84 still-births were investigated.

MATERNITY AND CHILD WELFARE.

Infantile Mortality during the year 1938.

Deaths from stated Causes at various Ages under One Year of Age.

CAUSE OF DEATH.					Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total Deaths under One Year.
i. Common Infectious Diseases.	Measles	...	...	...	...	...	...	...	...	...	...	1	...	1
	Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
	Diphtheria: Croup	...	...	...	...	...	...	...	...	...	...	...	...	...
	Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...
	Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...
ii. Diarrhoeal Diseases.	Influenza	...	...	...	...	...	...	...	...	...	...	...	...	...
	Diarrhoea, all forms including Enteritis, Muco-enteritis, Gastro-enteritis, &c.	...	...	...	...	1	...	...	1	4	3	4	1	13
	Gastritis	...	...	...	...	...	...	...	...	...	...	...	...	...
iii. Wasting Diseases.	Premature Birth	...	...	...	26	2	2	...	30	5	1	...	...	36
	Congenital Defects	...	...	...	3	3	2	2	10	6	2	...	1	19
	Injury at Birth	...	...	...	10	...	...	...	10	...	...	...	...	10
	Atelectasis	...	...	...	3	...	...	...	3	...	...	...	...	3
	Atrophy, Debility, Marasmus	...	...	...	2	...	...	...	2	1	...	...	...	3
iv. Tuberculous Diseases.	Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...
	Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...
	Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...	...	...	...
	Meningitis (not Tuberculous)	...	...	...	...	...	...	...	...	...	1	1	...	2
v. Other Causes.	Convulsions	...	...	...	1	...	...	...	1	...	1	...	...	2
	Bronchitis	...	...	...	1	...	...	...	1	1	1	1	...	4
	Pneumonia	...	...	...	1	...	...	...	1	1	4	2	5	13
	Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...	...	...
	Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...
	Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...
	Other Causes	...	...	...	6	...	...	...	6	4	4	1	...	15
TOTALS					53	6	4	2	65	22	17	10	7	121

Births { Legitimate 1,900
 registered { Illegitimate 75

Deaths { Legitimate Infants 110 Infantile Mortality = 57.9
 { Illegitimate " 11 " " = 146.7 } per 1,000 reg'd Births

None of the 121 infants had been vaccinated.

Table showing the Infantile Mortality Rate for the past 5 years.

Year.	Total.	Legitimate Infants.	Illegitimate Infants.
1938	61.3	57.9	146.7
1937	63.9	59.6	125.0
1936	61.7	57.7	77.7
1935	59.1	56.8	121.6
1934	56.3	54.0	116.9

NEO-NATAL DEATHS, 1938.

<i>Place of Birth.</i>	<i>Number of Births.</i>	<i>Neo-Natal Deaths.</i>	<i>Percentage of Neo-Natal deaths to Live Births.</i>
Nightingale Nursing Home ...	316	10	3.16
Women's Hospital ...	71	4	5.63
Derby City Hospital ...	608	30	4.93
(Includes 2 born and died before arrival).			
At Home attended by Borough Midwives ...	70	1	1.42
At Home attended by R.N.I. Nurses ...	344	8	2.32
(Includes 1 born and died before arrival).			
At Home attended by Municipal Midwives ...	342	9	2.63
3 Neo-Natal deaths occurred in cases where a doctor was engaged for confinement.			

Table showing Increasing Ratio of Neo-Natal Deaths, 1931-1938 inclusive.

<i>Year.</i>	<i>Total deaths under 1 year.</i>	<i>Neo-Natal deaths.</i>	<i>Deaths from 1 month—12 months.</i>	<i>Percentage of Neo-Natal deaths to total deaths under 1 year.</i>
1931	143	73	70	51.0
1932	147	67	80	45.5
1933	124	62	62	50.0
1934	118	67	51	56.7
1935	122	79	43	64.7
1936	125	64	61	51.2
1937	132	82	50	62.1
1938	121	65	56	53.7

OPHTHALMIA NEONATORUM,

Cases notified 41

Further information and the table required by the Ministry will be found on page 111.

PEMPHIGUS NEONATORUM.

Four cases were notified during the year.

Baby Incubators. No infants were placed in these incubators during the year.

Artificial Feeding. During the year, 277 notifications of proposals to substitute Artificial Feeding were received in accordance with rules of the Central Midwives Board. This number was a decrease of one as compared with the number received during the year 1937, and is equal to a percentage of 14.1 of the notified births. In 136 instances, Artificial Feeding was supplemental to Breast Feeding, two subsequently being substituted.

Maternity and Child Welfare Centres. There were nine Welfare Centres at the commencement of 1938, one managed by the Nightingale Nursing Institution and eight managed by the Corporation Health Department.

During April two centres (Ashbourne Road and St. Helen's Street) were transferred to the newly-completed School Clinic in Green Street, a position approximately mid-way between the two centres, leaving seven centres under direct control of the Corporation at the end of the year.

Health Talks were given at the Welfare Centres and Ante Natal Clinic by the Health Visitors, viz. :—

- 42 at Green Street Welfare (commenced 28/4/38).
- 33 at Alvaston Welfare.
- 13 at Ashbourne Road Welfare (transferred to Green St. 29/4/38).
- 74 at Rose Hill Welfare.
- 16 at St. Giles' Welfare.
- 11 at St. Helen's Street Welfare (transferred to Green St. 28/4/38).
- 37 at Nightingale Road Welfare.
- 11 at Nottingham Road Welfare.
- 34 at Dean Street Welfare.

Voluntary Helpers. 18 Voluntary Helpers have again rendered excellent service to the Department.

Attendances at Welfare Centres.

CENTRE.	Welcomes held.	No. of Children attending.	Attendances.			No. of Children weighed.	No. of Children seen by Doctor.
			Mothers.	Babies.			
				Under 1	1-5 Yrs.		
St. Helen's St....	12	† —	1064	677	637	1193	412
Rose Hill ...	147	1055	7883	5169	3560	8534	2977
Dean Street ...	51	430	3393	2481	1253	3673	1066
Alvaston ...	62	502	3384	2173	1732	3738	1162
Nightingale Rd.	104	684	4493	2697	2388	4994	1610
Nottingham Rd.	99	669	3852	2721	1759	4315	1480
Ashbourne Rd.	16	† —	885	573	465	990	291
St. Giles' ...	52	520	3108	2069	1403	3419	1296
Green Street ...	97	844	3938	2701	1873	4490	1176
*Trinity Street	51	234	1739	1396	393	1789	333
Totals ...	711	4938	33739	22657	15463	37135	11803

* Trinity Street Welfare is a Voluntary Centre controlled by the Derby and Derbyshire Nursing Association.

† Included in Green Street figures.

Numbers of Children making first attendances in 1938.

CENTRE.	Under 1 m'th	1-3 m'ths	3-6 m'ths	6-9 m'ths	9mth's 1 year.	Total.	1-5 years	Total.
St. Helen's Street	18	25	5	3	1	52	30	82
Rose Hill ...	116	152	36	22	12	338	224	562
Dean Street ...	60	88	9	10	6	173	56	229
Alvaston ...	35	54	7	2	1	99	112	211
Nightingale Rd. ...	54	81	17	12	7	171	136	307
Nottingham Rd. ...	71	92	21	17	10	211	141	352
Ashbourne Road ...	15	12	4	—	2	33	17	50
St. Giles' ...	53	76	14	11	—	154	103	257
Green Street ...	81	77	20	12	5	195	71	266
*Trinity Street ...	54	83	8	3	3	151	5	156
Totals ...	557	740	141	92	47	1577	895	2472

Numbers of Babies entirely artificially fed at first visit.

CENTRE.	Under 1 month.	1-3 months.	3-6 months.	6-9 months
†St. Helen's Street	—	—	—	—
Rose Hill ...	14	52	27	9
Dean Street ...	4	38	8	6
Alvaston ...	3	15	5	2
Nightingale Rd....	13	29	7	8
Nottingham Road	12	27	6	1
†Ashbourne Road	—	—	—	—
St. Giles' ...	6	25	8	5
Green Street ...	17	45	18	9
*Trinity Street ...	7	21	6	3
Totals ...	76	252	85	43

* Trinity Street Welfare is a Voluntary Centre controlled by the Derby and Derbyshire Nursing Association. † Figures included in Green Street.

CHILDREN OF PRE-SCHOOL AGE.

In the report for 1937 details were given of the scheme in operation for the Routine Medical Inspection of pre-school children. During 1938 the offer of an examination was extended as far as possible to all children between the ages of 2 and 5 years. The result of this is the greatly increased number of examinations as shown herewith.

Routine Medical Inspections	...	...	2,046
Re-Inspections	...	...	1,729
Special Examinations	...	...	109

The number of individual children who were referred on account of some defect was :—

Treatment	...	...	...	...	502
Observation	...	...	...	...	699

A summary of these defects is given below.

					<i>Treatment.</i>	<i>Observation.</i>
Malnutrition...	...	...	...	...	74	121
Ringworm, Scalp	...	...	...	...	1	—
Impetigo	...	...	...	...	4	1
Other Skin Diseases	...	...	...	...	32	32
Defective Vision	...	...	...	...	5	15
Squint	...	...	...	...	17	44
Conjunctivitis	...	...	...	...	7	1
Blepharitis	...	...	...	...	6	7
Styes	...	...	...	...	1	1
Other Eye Diseases	...	...	...	...	3	6
Otitis Media	...	...	...	...	5	5
Wax	...	...	...	...	1	—
Other Ear Diseases	...	...	...	...	1	—
Enlarged Tonsils	...	...	...	...	5	109
Adenoids	...	...	...	...	2	9
Adenoids and Enlarged Tonsils	...	...	...	...	11	41
Other Nose and Throat Defects	...	...	...	...	5	7
Enlarged Cervical Glands	...	...	...	...	3	3
Defective Speech	...	...	...	...	1	25

					<i>Treatment.</i>	<i>Observation.</i>
Defective Teeth	...	...	...	...	71	19
Heart Disease (Organic)	...	...	...	...	—	3
Heart Disease (Functional)	...	...	...	...	5	83
Anæmia	...	...	...	...	13	11
Bronchitis	...	...	...	...	76	91
Asthma	...	...	...	...	5	3
Epilepsy	...	...	...	...	—	1
Convulsions	...	...	...	...	1	1
Neurosis	...	...	...	...	3	3
Rickets	...	...	...	...	155	140
Spinal Curvature	...	...	...	...	4	3
Other Deformities	...	...	...	...	11	24
General Debility	...	...	...	...	47	57
Enuresis	...	...	...	...	9	12
Mental Condition	...	...	...	...	—	7
Oxyuris	...	...	...	...	8	7
Anorexia	...	...	...	...	13	24
Rheumatism	...	...	...	...	1	4
Constipation...	...	...	...	...	3	3
Hernia	...	...	...	...	2	17
Other Diseases	...	...	...	...	49	38

A point of special interest is the group of special examinations. These are children who have not had appointments but who have been brought by their parents on account of some intercurrent condition. It would appear to indicate that already the clinics for the pre-school child are beginning to influence the parents.

With the exception of minor ailments, all the clinics of the School Medical Service are available for the attendance of toddlers.

Below is a statement of the number of defects which were dealt with at the various clinics during the year :—

Ultra-violet Ray Clinic	...	...	...	...	218
Orthopædic Clinic	...	...	...	...	163
Aural Clinic	...	...	...	...	44
Ophthalmic Clinic	...	...	...	...	25
Skin Clinic	...	...	...	...	17

In addition to toddlers, the clinics of the School Medical Service (excepting minor ailments) are also available for children under two years of age seen at the Infant Welfare Centres.

During 1938, the following numbers of defects found in this group of children were seen at the various clinics :—

Ultra-violet Ray Clinic	...	...	...	...	112
Orthopædic Clinic	...	...	...	...	38
Aural Clinic	...	...	...	...	4
Ophthalmic Clinic	...	...	...	...	2
Skin Clinic	...	...	...	...	21

Work of the Health Visitors.**SUMMARY.****1. MOTHERS.**

Visits <i>re</i> Expectant Mothers	...	...	...	...	...	...	386
„ Mothers (Post Natal)	...	...	...	...	...	...	9

2. CHILD WELFARE.

Visits <i>re</i> Births	...	...	...	...	...	...	1,997
Re-Visits <i>re</i> Births (under 1 year)	...	...	...	...	...	...	7,653
„ Children 1—5	...	...	...	...	...	...	12,807
Visits <i>re</i> Still-Births	...	...	...	...	...	...	75
„ Deaths of Infants under 1 year	...	...	...	...	...	...	104
„ „ „ over 1 year	...	...	...	...	...	...	32
„ Medical Help Forms (Midwives)	...	...	...	...	...	...	402
„ Home Helps	...	...	...	...	...	...	16
„ Maternal Deaths	...	...	...	...	...	...	—
„ Artificial Feeding Forms	...	...	...	...	...	...	101
„ Diarrhoea	...	...	...	...	...	...	8

3. INFECTIOUS DISEASES, EXCLUDING TUBERCULOSIS.

Visits <i>re</i> Cases of Whooping Cough	...	...	...	...	...	...	543
„ Ophthalmia Neonatorum	...	...	...	...	...	...	157
Visits to other Infectious Diseases (Scarlet Fever, Diphtheria, Measles, Pneumonia, etc.)	...	...	...	...	...	...	3,040

4. OTHER PUBLIC HEALTH WORK.

Visits <i>re</i> Infant Life Protection	...	...	...	...	...	...	3
„ Outworkers	...	...	...	...	...	...	—
„ Workrooms	...	...	...	...	...	...	—
„ Sanitary Conveniences for Females	...	...	...	...	...	...	—

5. MISCELLANEOUS.

Visits <i>re</i> Special Investigations	...	...	...	...	...	...	1,257
„ Enquiries	...	...	...	...	...	...	225
Miscellaneous Visits	...	...	...	...	...	...	2,602
Unsuccessful Visits (Out, Removals, etc.)	...	...	...	...	...	...	5,381
Assisted at Mothers' Welcomes (Mornings and Afternoons)	...	...	...	...	...	...	1,117
Assisted at Ante-Natal Clinics	...	...	...	...	...	...	12

Medical Aid Forms. 532 reports were received by the Medical Officer of Health during the year. 415 of these were on account of the condition of the mother and 115 of the baby, while two related to both mother and infant.

Medical Practitioners' Fees. The total fees paid to local Medical Practitioners in respect of emergency cases attended in accordance with Section XIV. of the Midwives Act, 1918, amounted to £344 14s. 0d. in respect of 389 claims.

Milk for Expectant and Nursing Mothers and for Infants.

The following amounts were supplied during the year :—

	<i>Sold at cost price.</i>	<i>Supplied free.</i>	<i>Total.</i>
Dried Milk	... 11,599 lbs.	17,680 lbs.	29,279 lbs.

Home Helps.

The scale of fees chargeable to the applicant was revised on the 1st August this year. The maximum fee of 30/- charged to the applicants whose average weekly income was too high to permit them to come under the scale of reduced charges (i.e. 12/6, 10/-, 7/6) was increased to 50/-, the actual cost to the Department, and the reduced scale of charges was amended to a maximum of 40/- varying by amounts of 5/- down to the minimum of no charge.

During the first eight months of the year under the old scale of charges the number of maximum fee cases (i.e. 30/-) was 18 and the number of reduced fee cases was 20, and in two instances no charge was made. In nine instances the applications were withdrawn.

During the last four months of the year under the new scale the number of full fee cases (i.e. 50/-) was three and the number of reduced fee cases was 23 and in 12 instances no charge was made. In five instances the applications were withdrawn.

The total number of applications made during the first eight months of the year was 49 and the total number for the last four months of the year was 43 making a grand total of 92 for the whole year, an increase of nine on the total for 1937.

Nursing in the Home.

(a) The Royal Derby and Derbyshire Nursing and Sanitary Association provides District Nurses on application to an agreed charge per visit (and also Midwives and Maternity Nurses). It is an approved training school for Midwives, and pupils are trained there in conjunction with the Nightingale Nursing Home.

(b) Arrangements have been made with the Royal Derby and Derbyshire Nursing and Sanitary Association to provide skilled nursing for cases of Pneumonia, Puerperal Pyrexia, and Ophthalmia Neonatorum occurring in the Borough, who require it, and also for cases of Pneumonia after Measles and Whooping Cough, at a fixed charge per visit.

Nursing Homes.

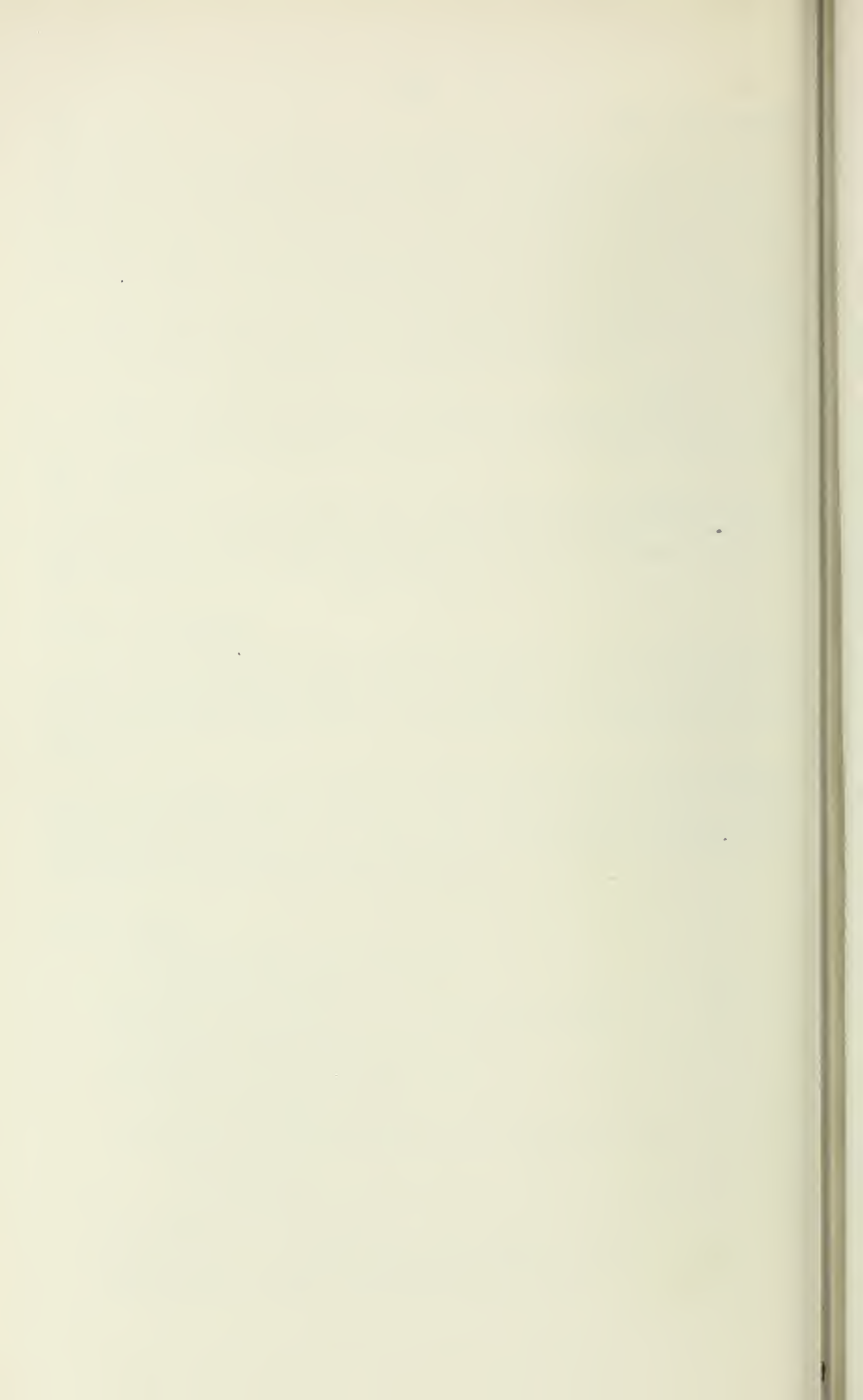
Registered at 31st December, 1937	...	...	...	...	3
(1) Applications for Registration	...	...	...	...	2
(2) Homes Registered	...	...	...	...	2
(3) Orders made refusing or cancelling Registration	...	...	...	...	2*
(4) Appeals against such Orders	...	...	...	...	—
(5) Cases in which Orders have been					
(a) Confirmed on appeal	...	...	...	...	—
(b) Disallowed	...	...	...	...	—
(6) Number of applications for exemption from registration	...	...	...	...	6
(a) Granted	...	...	...	...	6
(b) Withdrawn	...	...	...	...	—
(c) Refused	...	...	...	...	—
On register at end of year	...	...	...	...	3

Twelve visits of inspection were made during the year.

*Registration cancelled on request from the keeper.

Children Act, 1908.

On Register at beginning of year	...	...	...	...	...	20
Added during the year	...	...	...	...	...	26
Removed from Register—						
Taken out of the Borough	...	...	...	...	4	
,, to parents out of the Borough	...	...	...	...	5	
,, to parents in Borough	...	...	...	...	8	
,, to relatives in Borough	...	...	...	...	—
,, to Institutions in Borough	...	...	...	...	—
Adopted	...	...	...	...	1	
Reached nine years of age	...	...	...	...	6	
Died	...	...	...	...	3	
					—	27
On Register at end of year	...	...	...	...	...	16
138 visits were paid to these Children.						
Foster parents on Register at beginning of year	...	...	...	...	...	18
,, ,, ,, end of year	...	...	...	...	...	17



iii.--SCHOOLS
AND
SCHOOL CHILDREN.

REPORT BY
DR. A. MORRISON, School Medical Officer.

INCLUDING REPORTS BY
MR. ARTHUR STAFFORD, School Dental Surgeon.
MR. H. MOUNTFORD, Organiser of Physical Training.

SUMMARY OF INSPECTIONS.

		For the year 1937. Total.	For the year 1938. Total.	
Inspections—				
Medical Officers.				
Number of Routine Examinations at Elementary and Secondary Schools	...	8,584	9,080	
Number of Special Examinations at Schools and Clinics	...	6,694	6,697	
Number of Re-inspections at Schools and Clinics ...	...	22,428	23,054
		37,706	38,831	
Dental Officers.				
Number of Routine and Special Examinations at Schools and Clinics (Elementary and Secondary)	...	17,483	17,355	
Nurses.				
Number of Examinations at Elementary Schools ...	...	36,831	36,178
Number of visits paid—To Elementary Schools ...	316	2,819	2,363	
To Nursery Schools & Classes	259			
To Homes	2,244			
			42	
Total number of Inspections at Schools and Clinics by Medical Officers, Dental Officers and Nurses				
	...	92,020	92,364	
Defects found during Inspection—				
Medical Officers	...	45,994	46,172	
Dental Officers...	...			
		For		
		Requiring observation treatment.		Requiring observation only.
		25,349		25,285
		13,074		12,704
			8,183	
			—	
			46,172	
Consultation Clinics				

SUMMARY OF TREATMENT.

	<i>For the year 1937.</i> <i>Children. Attendances.</i>		<i>For the year 1938.</i> <i>Children. Attendances.</i>	
Minor Ailments Clinics	20,113	62,894
Dental Clinic	8,091	10,088
Number of Extractions	12,890
Number of Fillings	6,206
Ophthalmic Clinic	1,574	2,598
Number of glasses provided	1,090
Aural Clinic	1,276	3,844
Number of Operations performed under an Anæsthetic	310
Ultra-Violet Rays Clinics	1,765	22,507
Skin Clinic	276	1,371
Orthopædic Clinic	576	4,525
Total number of attendances for treatment	107,827	108,315

GENERAL REVIEW.

Number of Examinations.—There is only a slight general variation in the different categories in the number of children examined compared with 1937. This calls for no special comment except to notice that although the individual children attending the Minor Ailments Clinics are fewer the number of attendances is greater. The scheme of district clinics within reasonable distances from the schools may partly account for this.

Developments.—Several very important developments took place during the year :—

1. The new Nursery School and Clinic in Green Street was opened in May, 1938. This commodious and up-to-date building replaced the old Nursery School in Wright Street, and the School Clinic which had been held in the Friends' Meeting House, St. Helen's Street. Its design and equipment leave nothing to be desired.

2. A new non-provided Nursery School was opened by the Diocesan Training College in October, 1938. It consists of a large house which lent itself admirably for reconstruction, and an extensive garden situated in open surroundings. No effort has been spared to make this school attractive and efficient.

3. A Speech Therapist was appointed in September. Previously it was ascertained that there were approximately 250 children for whom some form of speech training was desirable. It has been found possible to use the school clinics in different districts for this purpose, so that long journeys to the Central Clinic have been obviated.

Findings of Medical Inspection :—

(1) Nutrition.—The question of Nutrition is still very much to the fore but there is little to add to what has already been said in the last few years. With regard to nature, apart from endeavouring to improve the physique of the parents of the future, little can be done. But regarding nurture, it is generally agreed that a balanced diet, healthy surroundings and plenty of sleep are the basic means of improvement. Hours of sleep are vitally important, and every opportunity is taken to impress the parents with the desirability of adequate rest for their children. In this connection the section on the amount of sleep obtained by a group of children (which is published below in the Special Enquiry on Visual Defects) is well worth investigation. Every year sees rapid progress in the demolition of bad housing areas and the establishment of families in a healthy environment. With regard to diet, two new factors may be mentioned :—

(a) All school children who are recommended by the Medical Officers, on account of poor nutrition, may have an additional third of a pint of milk per day.

(b) A new dietary for the free dinners is under consideration, and it is hoped that proteins, fats, minerals and vitamins which are deficient in so many dietaries may be largely increased as a result.

(2) **Uncleanliness.**—The percentage of children who had some uncleanliness of head or body declined slightly during the year. This may have been due to two factors, the steady inculcation of cleanliness by teacher, nurse and doctor, and to the fact that the number of nurses' examinations in school showed an increase. As washing facilities are ample in most houses it is difficult to see any cause for the continuance of uncleanliness other than the sheer carelessness or low hygienic standards of the parents.

(3) **Vision.**—After four years in which the percentage of children with defective vision had steadily declined, there was a set back in 1938 in the group of 8-year-old girls. As the reduction has been maintained in the 12-year-old groups, both boys and girls, and in the 8-year-old boys, and there are no factors present which might have influenced the group affected, the increase is difficult to explain. With regard to the steady improvement over the last few years, a special enquiry, which is printed later in the report, has been made to ascertain what changes, if any, have been associated with the conditions.

(4) **Hearing.**—It will be noted that there is an increase in the number of children who have been listed for treatment and observation on account of deafness. This increase is more apparent than real, and is due to the adoption of a higher standard. The question of an audiometer has been under discussion, but the adoption of the gramophone type has been postponed meantime until some of the pitfalls associated with the use of this instrument have been obviated.

(5) **Rickets.**—It is disquieting to find that the numbers of children who showed some evidence of Rickets have increased. With the gradual but distinct improvement in housing, the education with regard to infant feeding, and the opportunities afforded by the Health Department to obtain Cod-liver Oil and other anti-rachitic substances, a decline in this serious disease of children might reasonably have been expected.

School Premises.—Included in the report is another list of additions and alterations completed during 1938. All the lavatories in the Council Schools have now been modernised and made quite adequate. The changes in 1938 have been chiefly the addition of hot water to the existing systems, a refinement which has been both welcomed and appreciated.

Things to come :—

(1) Last year, in view of the Education Act coming into force in 1939, the question of the routine examination of an additional age group, or of changing the present age groups was discussed. Nothing need be added this year until it is estimated how many children are likely to remain in school until they are fifteen. If the numbers remaining are large some alteration in the present system will become imperative.

(2) **Child Guidance Clinic.**—Little need be added to what has already been stated with regard to the desirability of having a Child Guidance Clinic. The reports from the established clinics appear, to the unbiased observer, to show a large percentage of permanent successes, and for these good results

the essential conditions seem to be the selection of the appropriate cases for treatment, and the co-operation of the parents. There is every ground for believing that in Derby we have enough cases of the right type to justify a Child Guidance Clinic, and apart from the benefit which would accrue, experience elsewhere has shown that the expenses are to some extent offset by saving in other ways.

(3) Open Air School.—The success of the open air class at Sinfen School confirms amply the excellent results obtained throughout the country from the open air school. The value of these schools is one aspect of school medicine on which all opinions are unanimous, and the start of the contemplated new school in Derby will be eagerly awaited.

STAFF.

During the year the following additional appointment was made in connection with the School Medical Service :—

Speech Therapist.

SCHOOL ACCOMMODATION.

Accommodation for Medical Inspection.—Arrangements have been the same as in previous years and as reported in previous Annual Reports.

THE DERBY SCHOOLS.

The number of Public Elementary Schools within the Borough is 36. This number includes the Central School for Boys and also Temple House Special School.

SCHOOL ATTENDANCE.

The accommodation in Elementary Schools is 24,086. The number of names on the books is 19,457 and the average attendance 16,968.

CO-ORDINATION.

With the new scheme of the amalgamation of the Health and Education Medical Services, greater co-ordination, especially with regard to pre-school children, has now been accomplished and there would now appear to be very few aspects of School Medical work on which greater co-operation could be obtained.

THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

School Hygiene.

The following is a complete list of structural alterations carried out in schools during 1938 :—

School.	Department.	Work carried out.
Ashbourne Road ...	Junior Boys } Junior Girls } Infants }	Hot water to wash bowls.
Boulton ...	Parochial Hall	New Urinal.
Clarence Road ...	Senior Boys } Infants }	Hot water to wash bowls.
Derby School ...	—	New Urinal stalls.
Gerard Street ...	Senior Boys } Junior Boys } Senior Girls } Infants }	Hot water to wash bowls.
Kedleston Road ...	Senior Boys } Senior Girls } Infants }	Hot water to wash bowls.
Nightingale Road ...	Junior Boys } Junior Girls } Infants }	Hot water to wash bowls.
Nuns Street ...	Junior Mixed } Senior Mixed }	Hot water to wash bowls.
Pear Tree ...	Senior Girls } Senior Boys } Junior Girls } Junior Boys }	Hot water to wash bowls.
Reginald Street ...	Infants } Senior Girls } Senior Boys } Infants }	Hot water to wash bowls.

Medical Inspection.

Routine Medical Inspection has been carried out according to the schedule. All the Public Elementary Schools were inspected and re-inspected during the year.

Number of children inspected.—The total number of children inspected was 6,982. Of these, 3,748 were boys and 3,234 were girls.

The total—6,982—does not include all the children examined in the schools, as a considerable number was brought forward by the Head Teachers for some special examination. The total number of these cases amounted to 292.

FINDINGS OF MEDICAL INSPECTION.

Clothing and Footgear.

The percentage of children found to be inadequately clothed during the year was 1·2, this being a decrease of 0·9% on last year's figure.

The percentage of children whose footgear was recorded as unsatisfactory was 1·2, a decrease of 0·1% on the figure for 1937.

Malnutrition.

Under Table IIB. in the Appendix will be found a detailed statement of the findings with regard to Nutrition. The number of children in 1938 who were suffering from serious malnutrition was 8 compared with 4 in 1937, and the number noted with slight malnutrition was 846 compared with 792 in 1937 and 880 in 1936. The diagnosis of malnutrition was made on the usual criteria—height, weight, general tone, etc.

Uncleanliness.

7·4% of the children examined at the annual inspections were found to have slight degrees of uncleanliness.

Further particulars under this heading are given in that part of the report dealing with the work of the School Nurses.

Minor Ailments and Diseases of the Skin.

The following skin diseases were recorded at the medical inspections :—

Impetigo	...	...	25	Urticaria	...	...	12
Dermatitis	...	...	19	Warts	...	...	10
Seborrhoea	...	...	19	Other Diseases	...	...	44

These figures do not call for any special comment.

Visual Defects and External Eye Disease.

The total percentage of visual defects remained about the same as last year, and the most noteworthy aspect of the figures is the increase in the eight-year-old group of girls with more serious defects—5·3% to 10·1%. There was a reduction of these defects in the twelve-year-old girls from 16·4% to 12·2%, while the other two groups were about the same as in 1937.

The figures for the last four years are :—

Year.	Total examined.	Number defective.	Percentage.
1935	4869	1322	27·2
1936	5242	1279	24·4
1937	4680	858	18·3
1938	4549	842	18·5

In the eight and twelve year old groups, the percentages of children who were unable to read 6/6, 6/6, were :—

Year.	8 year boys.	8 year girls.	12 year boys.	12 year girls.
1935	25·8	33·7	26·9	25·9
1936	23·7	28·5	21·9	26·3
1937	13·8	14·5	21·0	23·2
1938	15·1	21·9	17·7	22·2

In the same age groups, the percentages of children with more serious defects (6/12 or worse in either one or both eyes), were :—

<i>Year.</i>	<i>8 year boys.</i>	<i>8 year girls.</i>	<i>12 year boys.</i>	<i>12 year girls.</i>
1935	10.5	12.5	17.2	15.4
1936	9.2	9.6	12.5	13.1
1937	5.5	5.3	11.3	16.4
1938	5.5	10.1	10.8	12.2

All children with defects over 6/9, 6/9, or reading 6/9, 6/9, but exhibiting any signs of eyestrain, were referred for refraction. The total number referred for refraction in each of the last three years was :—

1936	...	...	404
1937	...	...	339
1938	...	...	337

The number of partially sighted children, as judged by the accepted criteria, is 18.

Squint.—As in previous years, all children discovered to have a squint, even in the smallest degree, were recorded and listed for full examination.

The figures for the last three years are :—

<i>Year.</i>	<i>Entrants inspected.</i>	<i>Number with Squint.</i>	<i>Percentage.</i>
1936	1,610	102	6.3
1937	1,438	59	4.1
1938	1,492	76	5.1

External Eye Disease.—The following defects were found in the course of medical inspection :—

Blepharitis ...	... 53	Conjunctivitis ...	19
Other Defects	... 21		

Nose and Throat Defects.

The number of children referred for treatment for enlarged tonsils and adenoids was 2.1% of the number examined. This percentage has remained about the same for the past few years. Many cases with slight degrees of enlargement were not referred for treatment but placed under observation; the percentage of such cases was 10.5. Once again it was found that the majority of the cases were found in the infant group.

Ear Disease and Defective Hearing.

Otorrhœa in one or both ears was noted in 60 children in the course of routine medical inspection. Almost all these children were under treatment at the time of examination, as the policy of multiple branch clinics obtaining in Derby has the advantage that any occurrence of a condition of this nature may receive immediate attention.

Defective hearing was noted in 92 children. In most of them, the condition was slight and in none of them were the children seriously handicapped in their education on account of this difficulty.

The Head Teachers co-operate in the ascertainment of defective hearing by sending to the clinics all cases which they suspect, without waiting until the routine medical inspection.

Dental Defects.

3253 children were found at the routine medical inspection to have carious teeth. Only the urgent cases were referred direct to the School Dental Clinic, as in the majority of these cases the children are included in the routine age groups inspected by the School Dental Surgeons during the year.

Orthopaedic and Postural Defects.

Little can be added to the comments made in previous reports on the incidence of these defects. There was an increase in the number showing signs of Rickets—*e.g.*, from 585 in 1937 to 636 in 1938. This figure is very unsatisfactory, and it is evident that pre-natal care and continuous attention to the diet of the young child are essential if this disease is to be avoided. The postural defects are also too numerous, although in many cases they are slight and soon remedied.

The following deformities were noted at the routine medical inspections :

Rickets	...	...	...	636	Congenital Deformities,				
Spinal Curvature	...	...	...	597	Talipes, etc.	...	...	10	
Slight Chest Abnormalities				16	Torticollis	...	...	9	
Cleft Palate and Hare Lip				12	Infantile Paralysis	...	...	8	
Flat Foot	...	...	...	11	Other Defects	...	...	35	

Heart Disease and Rheumatism.

The number of children suffering from heart defects (functional and organic) continues to be high, as many as 5.9% being ascertained in 1938. Many of these defects are of a purely temporary character and are found to have disappeared on subsequent examination. In many of them, a history of rheumatism is obtainable, but in many others no cause can be assigned.

The number of children found at medical inspection to be suffering from Rheumatism declined from 80 in 1937 to 65 in 1938. This figure, however, is not indicative of the real prevalence of Rheumatism, as many cases are treated privately, or in institutions, or between routine inspections at the consultation clinics.

Tuberculosis.

Three cases were referred from routine medical inspection to the Tuberculosis Medical Officer for advice during the year.

In addition to these children, forty-three special cases were referred to the Tuberculosis Medical Officer for his opinion. Of that number, five were old notified cases of tuberculosis and seven others were children who had been previously referred for opinion.

VACCINATION.

756 (10.8%) of the 6,982 children medically inspected were recorded as having been vaccinated.

FOLLOWING UP.

The arrangements for the following up of children suffering from the various defects continued as outlined in the report for 1932.

ARRANGEMENTS FOR TREATMENT.

Consultation Clinic, Mill Hill Lane.—This clinic is reserved for children requiring special examination, cases referred from the Children's Welfare Officers, and for intermediate and concluding examinations of children having courses of Ultra-violet Ray treatment. 2,082 attendances were made at this clinic during the year. The following were the types of cases which attended the consultation clinic :—

Bronchitis...	...	...	451	Worms ...	...	...	28
Malnutrition	...	...	406	Skin Diseases	...	...	23
Heart Defects	...	...	271	Ear Diseases	...	...	17
Debility	...	...	206	Epilepsy	...	...	15
Tonsils and Adenoids	...	...	121	Constipation	...	...	15
Rheumatism	...	...	111	Chorea	...	...	13
Deformities	...	...	108	Enlarged Thyroid	...	...	11
Anæmia	...	...	104	Eye Diseases	...	...	9
Neurosis	...	...	77	Speech Defects	...	...	7
Anorexia	...	...	52	Non-Pulmonary Tuberculosis	...	...	6
Vision	...	...	50	Definite Pulmonary Tuberculosis	...	...	3
Other Nose and Throat Defects	...	...	45	Suspected Pulmonary Tuberculosis	...	...	2
Enuresis	...	...	39	Other Lung Diseases	...	...	2
Enlarged Glands	...	...	37	Other Diseases	...	...	137
Asthma	...	...	33				

Minor Ailments Clinics.—These clinics continue to function on the lines indicated in previous reports.

Minor Ailments Clinic.	Number of cases.		Number of attendances.		Number Average of clinics per held. clinic.	
	1937.	1938.	1937.	1938.	1938.	1938.
Mill Hill Lane ...	4,362	3,500	17,756	14,240	217	65
Green Street ...	1,652	1,895	7,064	9,859	86	114
Brighton Rd. School ...	1,632	2,038	4,397	4,968	86	58
Pear Tree School ...	2,171	2,348	6,545	7,921	83	95
*Traffic St. School ...	602	561	1,823	1,929	52	37
Firs Estate School ...	2,209	2,399	6,493	7,574	83	91
Nightingale Rd. School	2,653	2,408	7,274	6,329	83	76
Nottingham Rd. School	4,832	4,075	11,542	11,000	82	134

* Re-opened May, 1938 for Infants only.

As previously stated, although a great amount of the time of the Medical Officers is devoted to these clinics, it is time which is well spent and much unnecessary suffering is thus obviated. At these clinics, situated as they are in every district of the town, there is every opportunity for a parent or teacher to obtain medical advice on any child who appears below par. That the time of the Medical Officers is not wasted on cases which the School Nurse is quite competent to treat herself, may be shown by the fact that, although 16,017 special inspections and re-inspections were made in these clinics by the Medical Officers, the total number of attendances made was 63,820.

Dental Clinic, Mill Hill Lane. The Dental Clinic is held every day of the week (morning and afternoon).

Total number of cases attended	...	...	...	8,531
Total number of attendances	...	...	...	11,124
Total number of clinics held	...	...	...	1,525

MR. ARTHUR STAFFORD, School Dental Surgeon, reports as follows :—

“ Inspections. All the Elementary Schools were visited once during the year, children of all ages being inspected. The Secondary, Central, Special (Temple House) and Nursery Schools are not included in the Routine Scheme and are not therefore visited. Scholars from these schools are, however, given treatment at the dental clinic on being referred at school medical inspections or by making direct application for it, and these cases provided 534 special inspections.

TABLE A.

Ages	Routine (School) Inspections.											Special (Clinic) Inspns	GRAND TOTAL.
	5	6	7	8	9	10	11	12	13	14	Total.		
Elementary	1 805	1,587	1,767	1,931	1,985	2,019	1,961	1,745	1,708	313	16,821	97	16,918
Secondary...	—	—	—	—	—	—	—	—	—	—	—	437	437
TOTALS	1,805	1,587	1,767	1,931	1,985	2,019	1,961	1,745	1,708	313	16,821	534	17,355

156 sessions were spent on Elementary School inspections, and the results of these are to be found in Tables B and C.

TABLE B.

Ages.	Number Inspected.	Sound.	Defective but not requiring treatment.	REQUIRING TREATMENT.			
				Not referred.	REFERRED FOR TREATMENT.		
					Fillings only.	Fillings & Extractns.	Extractions only.
5	1,805	319	717	44	13	21	691
6	1,587	153	564	93	119	102	556
7	1,767	147	441	191	297	290	401
8	1,931	118	334	368	461	340	310
9	1,985	127	264	495	490	358	251
10	2,019	237	219	505	505	326	227
11	1,961	257	152	516	569	278	189
12	1,745	261	39	468	607	230	140
13	1,708	228	23	477	592	251	137
14	313	50	1	105	92	38	27
TOTALS ...	16,821	1,897	2,754	3,262	3,745	2,234	2,929
Percentage	100	11.3	16.4		72.3		

TABLE C.

School.	Number inspected.	PERCENTAGE.		
		Sound.	Defective but not requiring treatment.	Requiring treatment.
Allenton	1,020	10.2	8.2	81.6
All Saints'	227	8.8	11.5	79.7
Ashbourne Road	874	8.1	21.5	70.4
Boulton	755	9.0	18.0	73.0
Brighton Road	737	15.6	11.8	72.6
Christ Church	274	10.2	23.0	66.8
Clarence Road	370	13.5	10.5	76.0
Firs Estate	876	11.9	8.5	79.6
Gerard Street	683	9.1	16.2	74.7
Kedleston Road	564	12.8	10.1	77.1
Nightingale Road	718	12.1	17.6	70.3
Normanton	641	9.0	33.1	57.9
Nottingham Road	1,180	13.6	29.0	65.5
Nuns Street	267	8.2	21.4	70.4
Orchard Street	235	5.9	9.4	84.7
Pear Tree	1,136	9.3	15.6	75.1
Practising	343	9.9	20.7	69.4
Reginald Street	597	10.9	10.2	78.9
St. Andrew's	92	10.9	9.8	79.3
St. Anne's	266	15.8	9.0	75.2
St. Chad's	216	10.6	18.1	71.3
St. Dunstons	113	12.4	30.1	57.5
St. James' Church	620	14.2	16.5	69.3
St. James' Road	820	20.2	20.5	59.3
St. John's	280	12.9	19.7	67.4
St. Joseph's	400	5.8	11.7	82.5
St. Luke's	307	6.5	17.6	75.9
St. Mary's	461	10.6	15.0	74.4
St. Paul's	285	24.9	11.2	63.9
St Peter's	174	7.5	23.0	69.5
St. Thomas'	114	9.7	25.5	64.8
Sinfin	381	12.8	27.4	59.8
Traffic Street	452	4.4	14.6	81.0
Wilmorton	343	6.3	12.6	81.1
TOTALS	16,821 (100%)	11.3	16.4	72.3

Of the children found to be requiring treatment, 8,908 were referred for it, and the usual form of invitation to accept treatment was issued to their parents with the results shown in Table D. There was a pleasing increase of 3% on last year's figures relating to the number accepting treatment.

TABLE D.

School.	No. of forms issued.	PERCENTAGE.		
		Consents.	Refusals.	No reply.
Allenton	524	65.5	25.1	9.4
All Saints'	160	66.1	16.0	17.9
Ashbourne Road	469	67.8	23.1	9.1
Boulton	486	76.1	15.6	8.3
Brighton Road	297	66.5	18.3	15.2
Christ Church	129	63.8	33.3	2.9
Clarence Road	255	76.7	16.7	6.6
Firs Estate	617	66.3	24.4	9.3
Gerard Street	409	64.8	23.0	12.2
Kedleston Road	291	66.0	26.4	7.6
Nightingale Road	268	69.6	15.5	14.9
Normanton	284	79.6	13.6	6.8
Nottingham Road	371	61.7	19.5	18.8
Nuns Street	106	59.3	31.9	8.8
Orchard Street	143	42.6	29.1	28.3
Pear Tree	534	66.5	26.5	7.0
Practising	208	69.8	9.4	20.8
Reginald Street	426	55.3	35.3	9.4
St. Andrew's	70	62.0	25.4	12.6
St. Anne's	153	64.0	31.1	4.9
St. Chad's	140	73.6	17.1	9.3
St. Dunstan's	46	71.7	17.4	10.9
St. James' Church	332	69.2	21.3	9.5
St. James' Road	335	62.4	25.6	12.0
St. John's	132	54.4	37.5	8.1
St. Joseph's	298	76.1	14.2	9.7
St. Luke's	215	57.8	38.5	3.7
St. Mary's	258	65.8	20.4	13.8
St. Paul's	129	62.5	20.6	16.9
St. Peter's	93	57.7	21.7	20.6
St. Thomas'	39	65.1	34.9	—
Sinfin	173	78.5	18.8	2.7
Traffic Street	296	60.1	20.1	19.8
Wilmorton	222	70.7	21.3	8.0
TOTALS	8,908 (100%)	66.4	22.7	10.9

Treatment. Treatment is carried out every day of the week at the Central School Clinic, where three surgeries are kept constantly occupied. Details of the treatment appear in Table E.

TABLE E.

	FILLINGS.			EXTRACTIONS.			ANÆSTHETICS.		OTHER OPERATIONS.		
	Temp. Teeth.	Perm. Teeth.	Total.	Temp. Teeth.	Perm. Teeth.	Total.	Local.	Nitrous Oxide.	Temp. Teeth.	Perm. Teeth.	Total.
Elementary	2	6,030	6,032	11,145	3,118	14,263	1	6,256	7	209	216
Secondary...	—	1,116	1,116	103	249	352	6	249	2	38	40
TOTALS ...	2	7,146	7,148	11,248	3,367	14,615	7	6,505	9	247	256

The increase in staff has allowed a consequent growth in treatment, and the foregoing figures show a substantial rise on those appearing in previous reports. The most valuable increase is that relating to conservative work, the number of fillings inserted in permanent teeth being nearly 1,000 more than in 1937. The number of permanent teeth extracted remains higher than is to be desired, but it should be noted that 193 of these were sound teeth removed from overcrowded mouths for orthodontic purposes. Practically all extractions were performed under general anaesthesia (Nitrous Oxide or a combination of Nitrous Oxide and Oxygen) a local anaesthetic being used in only 7 cases. There was the usual small number of cases for the treatment of gum conditions and for scaling and polishing of teeth, etc., but none of outstanding merit.

The children treated at the clinic may be divided into three groups—(a) those referred as a result of annual Routine Dental inspections at schools (Elementary School children only), (b) those referred at Routine Medical inspections at schools (including Secondary School children) and (c) casual cases (for toothache, etc.) from all sources.

Table F shows an analysis of these attendances.

TABLE F.

	From Dental Inspection.	From Medical Inspection.	Casuals.	TOTAL.
No. of Attendances	7,275	1,445	2,404	11,124
No. of Children	5,955	631	1,945	8,531

Propaganda Work. 31 lectures were given to 4,950 children of the senior departments of the elementary schools, and 2,685 pamphlets on the care of teeth, published by the Dental Board of the United Kingdom were issued during the year for distribution to senior scholars.

Brief Report on Branch Dental Clinics.

With the growth of the Borough generally, and on account of the housing developments in the Roe Farm, Normanton and Boulton districts in particular the establishing of branch dental clinics calls for attention. In the past, the advantages of centralised work have been made use of, but it would now seem that a point has been reached when the distances between the outlying parts and a central clinic are such as to involve considerable loss of school time to children and inconvenience to parents, as well as the cost to both of travelling, which might be reasonably considered to affect the acceptance of and/or attendance for treatment. It is not possible to measure this statistically but one frequently hears from these parents that they attend under these difficulties.

The question of branch clinics concerns not only the work for the Education Department, but also that for the Health Department, and as dental attention for Ante-Natal cases is about to be commenced in these areas, and further, as new Child Welfare Clinics are to be erected, it may be desirable to consider including provision for dental inspection and treatment in the future.

Health Department Work.—With regard to Nursing and Expectant Mothers there is only the matter of inspection to consider, as treatment for them is already provided elsewhere, and more suitably so. No special facilities are therefore necessary on this account other than a few simple and portable effects. There remains, however, the dental care of pre-school children, and for the immediate purposes this may be dealt with under school work.

School Work.—Any arrangements for the dental attention of school children (and pre-school children) must include facilities for treatment as well as inspection, and the matter of premises becomes at once apparent. At the Roe Farm clinic no special provision has been made, and it is with reference to clinics to be erected in the future that early information on the essential structural features may be useful.

The necessary rooms required are surgery, Recovery Room and Waiting Room.

Surgery.—No smaller than 9' × 12'. Good light. As far away from Waiting Room and road as possible. Water supply—hot and cold, washbowl; cold, spittoon. Electricity—steriliser, engine (or unit) and chair light.

(Note.—If dental clinic only part time, equipment makes room not very suitable for other purposes).

Recovery Room.—No smaller than 9' × 7'. Next to Surgery, with direct access to latter and exit to corridor or Waiting Room. Water supply—hot and cold. Special rinsing sink.

(Note.—If dental clinic only part time, room suitable for other purposes).

Waiting Room.—Common to clinic.

The layout of the new Child Welfare Clinics is unfortunately not ideal for dental work in that the centrally situated Waiting Room is adjacent to all treatment rooms, rendering the sound factor a difficult one to deal with satisfactorily. This is of such importance, that where a surgery cannot be well separated from a waiting room, walls and door of sound-proof construction are indicated."

Ophthalmic Clinic, Mill Hill Lane.—As previously stated, the Ophthalmic Clinic, held several times weekly, is generally reserved for refractions and vision testing. The Consulting Oculist, however, holds a weekly session in which he sees the more difficult visual defects and cases in which orthoptic treatment is advised. This session is also employed for consultation purposes for those more severe eye affections such as Keratitis, etc., which have been seen previously at the minor ailments clinics.

Total number of cases attended	...	...	...	1,508
Total number of attendances	...	...	...	2,588
Spectacles provided at contract rates	...	...	...	1,062

These cases exhibited the usual variations in defective vision as in previous years, and call for no special comment. Included in these figures are 28 cases which were referred from Child Welfare Centres.

Orthoptic Clinic.—A general statement with regard to this clinic was made in last year's report. The clinic is carried on by two Orthoptists under the general supervision of Mr. C. H. Bamford, who is the Consulting Oculist to the local Education Authority. I am indebted to Miss W. D. Lord, the Orthoptist in charge of the Department, for the following report :—

Referred to Orthoptic Clinic	...	...	...	233
On Waiting List	...	...	...	60
Under Observation (too young at present)	...	...	...	22
Discontinued treatment	...	...	...	17
On preliminary treatment (Occlusion)	...	...	...	19
On actual treatment	...	...	...	50
Discharged—cured	...	...	...	65
				— 233
Number of operations	...	...	...	12

The 17 cases for whom treatment was discontinued may be thus classified :

ON PRELIMINARY TREATMENT (9) :—These cases had to be stopped because, in spite of persistent occlusion, the amblyopia did not improve—they were in most cases too old.

All such cases of amblyopia that do not respond to patching alone are given a course of twelve treatments on the myoculator for retinal stimulation before they are definitely refused.

ON ACTUAL TREATMENT (5) :—

1 required operation in order to obtain a perfect cure, but consent was withheld by parents.

2 were given a long trial on regular treatment, but proved too old to obtain fusion.

1 was a post-operation case which had been operated on before the Department was established. Given long trial, but failed to obtain fusion.

1 greatly improved, but powers of concentration were very poor, and as patient was only deviating very slightly, regular treatment was discontinued.

Of the remaining three, 1 patient left the town and the other 2 refused to attend.

The year's work from an Orthoptist's point of view has been very satisfactory.

The majority of older children who were referred to the Department in 1936 have now been dealt with, and the waiting list consists mainly of children who have just attained the age of seven. The attendance of Borough Clinic cases is extremely good and co-operation from parents also encouraging.

There is, of course, quite a number of children whom Orthoptists classify as "dull." These patients appear quite up to standard in their school work, but for some reason find training difficult. This explains why there are a few children on the waiting list of eight and nine years of age, but unless co-operation is up to standard required in this Department, I personally consider that a much better result is obtained by waiting a little longer.

Aural Clinic, Mill Hill Lane.—This Clinic is held once weekly, when the School Aurist attends for examinations and general treatment. The number of children who received operative treatment for enlarged tonsils and adenoids in 1938 was 381, compared with 306 in 1937, 288 in 1936 and 376 in 1935. The general procedure remains as formerly described and operative treatment advised only when conservative measures have failed.

The treatment of otorrhœa continues on both local and general lines. All cases are kept under treatment until clear, and, by the system of multiple clinics which obtains in the town, any recurrence is brought under treatment immediately.

Total number of cases attended	...	...	...	1,225
Total number of attendances	...	...	...	3,281
Number of Clinics held by Specialist	...	...	...	33
Average number per clinic seen by Specialist	...	...	...	56

Included in these figures are 66 cases referred from Child Welfare Centres.

Ultra-Violet Therapy.—Full details of this treatment have been given in previous reports, and it is evident from the results obtained and the general satisfaction of the parents that Ultra-Violet Therapy is now firmly established as an efficacious mode of medical treatment.

Ultra-Violet Ray Clinic, Mill Hill Lane.—The following were the types of cases treated during the year :—

Erythema Pernio	...	...	25	Septic Sores	...	...	...	2
Dermatitis	...	...	6	Eczema	...	...	...	2
Chronic Ulcers	...	...	5	Xeroderma	...	...	...	2
Keloid	...	...	3	Alopecia Areata	...	...	...	2
			Other Diseases	...	...	...	3	
Bronchitis...	...	...	217	Anorexia	...	...	...	24
Malnutrition	...	...	204	Rickets	...	...	...	20
General Debility following infectious diseases, etc.	...	...	181	Asthma	...	...	...	19
Anæmia	...	...	49	Rheumatism	...	...	...	17
Neurosis	...	...	27	Enlarged Glands	...	...	...	16
				Other Diseases	...	...	...	15
Total number of children attended	...	...	...		...	...	...	839
Total number of attendances	...	...	...		...	...	...	13,899
Total number of clinics held	...	...	...		...	...	...	374
Average number per clinic	...	...	...		...	...	...	49
Total number of exposures	...	...	...		...	...	...	14,013

In addition, 347 cases referred from the Child Welfare Clinics made 4,578 attendances, receiving 4,584 exposures.

Ultra-Violet Ray Clinic, Wright Street Nursery School.—This clinic was closed in April, 1938, on the opening of the new Central Nursery School.

Ultra-Violet Ray Clinic, Green Street.—This clinic is a section of the new Green Street Clinic which was opened in May, 1938. It is held on four or six sessions per week as required. Arrangements have been made for children

attending the Central Nursery School who require Ultra-Violet Ray Therapy to attend on two sessions weekly for this purpose. The following were the types of cases treated during the year :—

Erythema Pernio	...	...	2	Impetigo	...	...	...	2
Bronchitis...	...	...	30	Malnutrition	...	...	...	4
General Debility following infectious diseases, etc.	...	...	11	Rheumatism	...	...	...	1
Anæmia	...	...	4	Rickets	...	...	...	1
Total number of children attended				...	...	...	...	165
Total number of attendances				...	...	...	...	2,516
Total number of clinics held				...	...	...	...	119
Average number per clinic				...	...	...	...	26
Total number of exposures				...	...	...	...	2,531

In addition, 67 cases referred from Child Welfare Clinics made 540 attendances, receiving 540 exposures.

Skin Clinic, Mill Hill Lane.—This clinic is held one afternoon per week. The following were the types of cases treated during the year :—

Dermatitis	...	...	62	Impetigo Contagiosa	...	...	9
Ringworm Scalp	...	...	48	Ringworm, Body	...	...	8
Alopecia Areata	...	...	39	Psoriasis	...	...	7
Warts	...	...	31	Ichthyosis	...	...	5
Seborrhœa Capitis	...	...	19	Urticaria	...	...	4
Seborrhœa Corporis	...	...	18	Xeroderma	...	...	4
Acne	...	...	17	Nævus	...	...	3
Eczema	...	...	15	Erythema	...	...	2
Seborrhœic Dermatitis	...	...	14	Scabies	...	...	2
Other Defects				...	...	...	27

Total number of cases attended	...	...	...	...	...	325
Total number of attendances	...	...	...	...	...	1,652
Total number of clinics held by Specialist	...	...	...	...	...	43
Average number per clinic seen by Specialist	...	...	...	...	...	30

Orthopædic Clinic, Mill Hill Lane.—The Orthopædic scheme continues as outlined in a previous report. The Specialist attends weekly for consultation and cases are referred for treatment under three categories :—

- Long term hospital cases—County Orthopædic Hospital, Bretby.
- Short term hospital cases—Borough City Hospital, Derby.
- Minor cases—Orthopædic Clinic.

*Total number of cases attended	...	...	...	623
Total number of attendances	...	...	...	4,317
Total number of clinics held by Specialist	...	...	...	33
Average number per clinic seen by Specialist	...	...	...	25

* Includes 202 cases referred from the Child Welfare Clinics.

Types of cases examined :—

Spinal Curvature (excluding Tuberculosis)	...	...	...	...	171
Foot Deformities (Pes Cavus, Pes Planus, Hammer Toe, etc.)	...	...	...	...	79
Rickets	...	...	...	...	90
Infantile Paralysis	...	...	...	...	9
Torticollis	...	...	...	...	21
Talipes	...	...	...	...	5
Congenital Paralysis (Spastics, Spina Bifida, etc.)	...	...	...	...	9
Crippling due injury and diseases	...	...	...	...	11
Dislocation Hip	...	...	...	...	2
Other Defects	...	...	...	...	36

During 1938, the following 14 cases of severe crippling came to the notice of the School Medical Officer for the first time. These cases were either recorded at the routine examinations or else attended the clinic. All were under treatment except for one congenital deformity for which nothing could be done.

Anterior Poliomyelitis...	...	...	...	8
Talipes	...	...	...	3
Congenital Deformities	...	...	...	3

During 1938, no cases of Infantile Paralysis were notified to the Medical Officer of Health.

Summary of treatment :—

(a) At Bretby	...	...	...	...	...	2
School children :—	Anterior Poliomyelitis	...	...	...	1	
	Severe Scoliosis	...	...	...	1	
(b) At the City Hospital	...	...	...	...	...	20
School children :—	Torticollis	...	...	...	1	
	Osteochondritis	...	...	...	1	
	Hallux Valgus	...	...	...	1	
	Shortening Tibia	...	...	...	1	
	Excision scar and skin grafting (Thumb)	...	...	...	1	
	Hydrocephalus	...	...	...	1	
	Spastic Diplegia	...	...	...	1	
	Anterior Poliomyelitis	...	...	...	7	
	Dislocation Hip	...	...	...	1	
Pre-school children :—	Hemiplegia	...	...	...	1	
	Rickets	...	...	...	1	
	Dislocation Hip	...	...	...	1	
	Spastic Diplegia	...	...	...	1	
	Spastic Left Leg	...	...	...	1	
Number of X-ray examinations	...	...	...	...	...	21
(c) At the Orthopaedic Clinic :—	...	...	...	...	...
Massage and Exercises	...	...	...	...	1,338	
Electricity	...	...	...	...	332	
Radiant Heat	...	...	...	...	14	
Remedial Gymnastics	...	...	...	...	2,231	
					—	3,915
Attendances at Splint Maker	...	...	...	...	...	275

Speech Clinic.—This clinic was started in September, 1938.

Number of cases selected to commence treatment :—

	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Stammerers	39	4	43
Cleft Palate	2	5	7
Other speech disorders	29	11	40
			—
			90

Number of cases admitted since commencement of clinics :—

	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Stammerers	5	4	9
Cleft Palate	1	2	3
Other speech disorders	5	4	9
			—
			21

Total under treatment during period 1st September to 31st December, 1938	111
---	-----

Number on register on 31st December, 1938 :—

	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Stammerers	43	5	48
Cleft Palate	3	8	11
Other speech disorders	28	12	40
			—
			99

During the period under review eight children left school, three were withdrawn by the parent and one was considered unsuitable and treatment was discontinued. Their condition on discharge was as follows :—

	<i>Stammerers.</i>	<i>Other speech disorders.</i>
Much improved	—	5
Slightly improved	3	4

INFECTIOUS DISEASES.

The system of notification by the Head Teachers and Children's Welfare Officers and methods of procedure were continued as in previous years. The total number of notifications received from the school authorities was 759. The numbers of children who contracted infectious diseases compared with those from 1934 are shown herewith :—

	1934	1935	1936	1937	1938
Diphtheria	130	168	168	127	169
Measles	2,153	323	1,874	1,258	532
Whooping Cough	267	151	204	201	82
Scarlet Fever	251	274	474	467	380
Varicella	707	395	374	684	339
Mumps	18	293	113	75	12

These figures show at a glance the variations in the incidence of the chief infectious diseases during the past five years.

The close co-operation between the Health and School Medical Departments has continued as outlined in previous reports.

School Closure.—It was not found necessary to close any of the schools during the year.

Diphtheria Swabbing.—During 1938, 585 throat and nasal swabs were taken from school children, and of these, 111 were found to contain diphtheria bacilli, a percentage of 18.97.

Diphtheria Prophylaxis.—Dr. W. E. Haigh, Senior Assistant Medical Officer of Health, has carried on the immunisation clinics at Derwent Street in various Child Welfare Centres, and in the schools. Particulars of this work, given in another section of the general report, show that considerable progress has been made in the number of school children immunised.

OPEN-AIR EDUCATION.

The Open-air Class at Sinfin School has continued during the year. Fourteen children were discharged in 1938, and 14 children admitted. The length of time spent by those who were discharged varied from eleven to thirty-two months, and the reasons for those leaving at the end of eleven months were partly on account of better health, but chiefly because of age, as under the present arrangements only children between seven and eleven years can be admitted. All the children who were discharged had improved greatly in health and physique, and their average gain in weight for the last twelve months was 5 lbs. 13 ozs. In point of fact, however, in these cases the weight increase, although entirely satisfactory, is only one aspect of the great general improvement which takes place in these cases. All the other recognised criteria of better physique, mental alertness, cheerfulness, greater activity, resistance to infection and improved physical tone are all manifested. This improvement is all the more striking as in many of the cases there is overcrowding at home, and the social and economic conditions are far from satisfactory.

PHYSICAL TRAINING.

Mr. Mountford, Organiser of Physical Training, reports as follows :—

“ For the first time in the history of School Athletics, the Inter-County Championship Sports were held in Derby in 1938. This event was known a year previously and under such circumstances it was natural that more than average interest should be devoted to this branch of physical education.

Interest in School Athletics probably first started more than 20 years ago when the Schools Athletic Association organised the first Annual Schools' Sports Day. These, like so many sports of that period, were organised on lines largely identical with the sports meetings for adults. For many years they were well patronised by parents and the general public and were as highly popular as they were highly competitive. Whilst the interest of the general public was maintained changes in the sports were difficult to make. With the waning of public interest, however, it was possible to direct attention to the welfare of the competitors. Gradually the longer distance races were cut out and even sprint races were shortened according to the age of the competitors. Such exhausting events as the tug-of-war were dropped and team events of a suitable character were introduced. Alongside with these changes, individual schools had commenced to organise their own school

sports and this helped greatly to change the outlook on the Annual Sports Day, so much so, that during the past year a complete reorganisation of the Sports Day was made. The Sports were organised as an Inter-Schools' Competition instead of the competition for individuals. The schools were arranged in groups: Reorganised Senior, Unreorganised Senior, etc., and each school sent a representative team to compete against the other schools in its group. Winners and places for the various events gained points for their school and the individuals themselves were awarded certificates showing their particular achievement in place of the usual prizes. The Sports were held on the Municipal Sports Ground in June and taking into consideration their completely changed character they were a definite success, and this augurs well for the future.

This new policy should have a marked effect on Athletics and it will soon be found that the daily Physical Training lesson and Organised Games lesson can play a very purposeful part in the general improvement. The Annual Sports Day will rightly be the outcome of the individual school sports and, as often referred to in this report, the individual school sports must be the natural outcome of the normal physical activities of the daily work throughout the year. The old fashioned Sports Day of the past left Athletics to the whim and fancy of a few individuals. The new policy will make Athletics the duty of the school and should affect all individuals.

The Inter-County Championships were held on the Municipal Sports Ground in July and were a huge success. Twenty counties took part in the competition and the March Past was taken by Lord Aberdare, the Chairman of the National Keep-Fit Council. The Derby Schools Athletic Association are to be congratulated on the splendid way the Sports were organised. Thanks are due to the Derby Corporation for making the Sports possible and to the Rolls-Royce Co. who afterwards entertained the whole of the competitors, stewards and workers to tea.

Physical Training and Organised Games Lessons.—It has just been suggested that the Physical Training lesson is the proper place for training for Athletics and this applies in a similar manner to any other specialised activity such as the major games and dancing. Success in these activities can be achieved if the subject is tackled in the right way. It is only too true that success in the specialised activities is often achieved by the intensive coaching of a few chosen boys and girls. This is the easy way but it can never be justified because on the one hand the larger number of pupils are neglected and on the other the few often become ill-balanced and on leaving school promising material often fades out when the support is taken away. Success can be achieved if the Physical Training lessons are used as a means of training rather than an end in themselves. There is a tremendous difference in results between the teachers who teach Physical Training to boys and the teacher who trains boys through Physical Training. In theory, the difference in these outlooks may appear simple but in actual practice it presents one of the major problems of the organiser.

During the past year two men and two women teachers of physical training in Senior Schools were granted leave of absence with pay to attend a three months' course of Physical Training. These courses must obviously be well-worth while for all teachers who take Physical Training as a special subject in the Senior Departments. Such specialisation, however, must not be allowed

to act as an excuse by the remainder of the staff for shelving their responsibility in the general physical welfare of the boys and girls. If the better teaching of physical training by specialists is to bear fruit it will always need the constant after-care and attention of the Head and staff during the whole school life of the children. The problem of the physical training for the extra year at school can be safely left in the hands of teachers who take this special training. Moreover it is hoped that in the near future one year trained physical training teachers will be available for the senior schools. Where the use of apparatus is included in the physical training of senior children it would be advisable if the Education Committee, when making appointments, would consider the possession of these extra qualifications.

Provision and Storage of Gym Dress.—The provision of suitable clothing for the Physical Training and Games lessons is one of the most important advances which has been made for some years. It is commonly accepted that suitable clothing and footwear which will allow the maximum amount of unrestricted movement is of the utmost importance. In addition, the changing of clothing provides the body with something in the nature of an air bath and this, together with a vigorous rub down with a towel is of real value in the promotion of health.

As was reported last year, a start in this direction has been made and the provision of shoes, knickers and vests for necessitous children is assured. A steady supply of clothing over a period of years would soon provide for all senior children.

This year, storage accommodation has been provided for the clothing already distributed. Double compartment racks (one for clothing, one for shoes) in galvanised wire and made up in units of 40 have been chosen for this purpose. In most cases it will be possible to place the racks near or over the existing hot water pipes in the cloak rooms. One possible disadvantage of these open-work racks will be the easy collection of dust. It will probably be necessary to provide covers to place over the racks during the cleaning up periods of the school caretakers.

Playing Fields.—The position with regard to playing fields remains much the same as in previous years, and most schools are still dependent on the Public Recreation Grounds. As was pointed out in last year's report, these grounds improve yearly but they fall very short of the present requirements.

Swimming.—Although figures are not available it is safe to say that there are few boys and girls who leave Derby schools unable to swim at least a width of the baths. Most of the children who cannot swim are prevented from taking part either on medical grounds or because of parental objection. Fortunately, objections by parents are decreasing yearly. It is remarkable that such splendid results are achieved with Derby's limited accommodation, which has reached saturation point. The Reorganised Senior Departments are gradually demanding more time for swimming and it is now necessary to limit the number of classes in the Junior Schools. Monday to Friday 9 a.m. to 5 p.m. each day (with the exception of Wednesday afternoon at Queen Street Gala Bath) is taken up by relays of school classes often reaching 40 in number. These classes follow one another in quick succession and on several sessions there is a class waiting to enter the water as another class

leaves it. This sometimes means that there are three classes of school children in the Baths at the same time—one changing after their swim and getting ready to leave, a second class in the water and a third class changing ready to enter the water. Changing accommodation is crowded to capacity and such congestion must surely affect the attendance of the general public.

Evening School Physical Training and Keep-Fit Classes.—The Education Committee agreed to make all physical training and keep-fit classes free of charge. In the past these classes have been limited to students taking other subjects in the Evening Institute classes with the exception of one or two adult classes. It is now possible for any boy or girl, youth or young woman, to attend a keep-fit class without enrolling as a student for the more academic subjects. Already there has been an increase in numbers attending the keep-fit classes and it is hoped that such increase will continue as this new policy becomes better known.

A keep-fit swimming class attached to the Ashbourne Road Centre was organised for the first time at Queen Street Baths. On the first evening only 5 students enrolled but the number soon increased to 20 and there is every indication that this class will be a success. One of the main difficulties in connection with evening swimming classes is the arrangement of convenient times. It is not possible for many students to attend classes after work before 7 p.m. and this leaves little time before the Baths are closed for official swimming clubs who have sole use of the Bath for the last hour. At the same time, only one Swimming Bath is open during the winter session. The Superintendent of the Baths is well disposed to the idea of swimming classes and if it is possible to arrange other classes this will be done next year.

Most keep-fit classes continue during the summer term and take part in outdoor activities in the school playgrounds and have the use of the school hall in wet weather.

The Leaders in charge of these classes are teachers who, without exception, men and women, have attended holiday courses for leaders. This year all the men leaders were given leave of absence to attend the one week's course organised by the Central Council for Recreative Physical Training at Heswell. This is a splendid course for leaders of keep-fit classes and all the men spoke in praise of the course and expressed a wish to attend next year.

In connection with the Allenton Youth class it was interesting and not a little surprising to find the reason for a real slump in the number attending at the commencement of the season. A rumour had spread in the district that enrolment at a keep-fit class made them available for national service. In spite of assurances, the numbers unfortunately never reached the average for the previous year.

Out-of-School Activities.—Out-of-school activities play no mean part in the life of school children and the many voluntary associations who carry on these activities are to be congratulated on their splendid work. These associations can be assured that their excellent work is fully appreciated by the Education Committee.

Schools' Athletic Association.—Football, Cricket, Netball, Stoolball, Swimming and Life-Saving and Athletics are the chief activities of the association and their work in this connection is well known. The usual competitions have been arranged and in addition the Athletic Section were largely responsible for the staging of the Inter-County Championship Sports to which reference has already been made.

Derby Folk Dance Club.—The Club arranged the annual competitions for the Petty and Lewis Shields and the high standard of dancing was maintained.

Committee for the encouragement of Swimming.—The Committee continue their splendid work in connection with swimming. The tests for the awards of free season tickets, generously provided by the Baths Committee, were carried out as usual. The Committee have now made it a rule that all boys and girls gaining these awards must join one of the many swimming clubs, who accept these young members free.

Play Centres.—The Orchard Street and Traffic Street Play Centres were opened as usual during the winter months. There has been a considerable amount of clearance of old property in the Orchard Street area but this has not so far affected the number of children attending the centre.

Camping.—The usual arrangements were made for the schools' holiday camp at Abergele. 322 boys and 286 girls attended the camp during the four weeks of the summer vacation and a fifth week was taken by the Central Boys' School. Each year this school has an increasing number of campers. 65 boys attended as against 54 the previous year.

It is impossible to give too high praise to the camp staffs, men and women, who give up a fortnight of their holidays to carry on this extremely responsible and arduous work. The Education Committee fully realise and appreciate the work done and each year a sincere vote of thanks is accorded to all who share the work. It would be difficult to find a happier band of campers and this spirit finds an equally happy response in the children."

PROVISION OF MEALS.

The provision of meals continues on the lines indicated in previous reports. The numbers of children on the Free Meals List compared with those for the two previous years are :—

1936	...	251
1937	...	332
1938	...	536

The increase has been caused, to a large extent, by the higher income scale which was adopted in 1937.

On the part-payment list there are now 101 compared with 104 in 1937.

A medical examination of all children for whom free meals were applied was undertaken, and the number of children so examined during 1938 was 360.

The numbers of children on the milk register compared with the two previous years are :—

1936	...	11,000
1937	...	10,937
1938	...	11,230

The totals of free issues (included in the above figures) are :—

1936	...	2,100
1937	...	2,205
1938	...	2,786

The provision of milk was continued during the holidays to children on the free list. In 1938, 22,725 bottles were distributed.

CO-OPERATION OF PARENTS, TEACHERS, CHILDREN'S WELFARE OFFICERS AND VOLUNTARY BODIES.

Parents.—The number of parents who attended with their children for routine medical inspection was as follows :—

	<i>Number.</i>	<i>Total Percentage.</i>	<i>Percentage in Infant Group.</i>
1936	4,029	52%	86%
1937	3,524	51%	81%
1938	3,783	54%	80%

Teachers and Children's Welfare Officers.—As without goodwill and intelligent co-operation things can so easily go wrong, it is once again a pleasure to record a harmonious year, and to acknowledge gratefully the cordial and generous assistance given by the staff—medical, nursing and clerical, Education Department officials, Teachers and Welfare Officers, especially the Superintendent, Mr. F. Gates. To all these I extend my sincere thanks.

Voluntary Bodies.

(a) Invalid Children's Aid Association.—The close co-operation established between the School Medical Department and the Invalid Children's Aid Association was maintained during the year. Many cases have been referred by the School Medical Officer to this Association, who have not only provided allowances for increased food, but have also undertaken to send cases to the seaside and helped them in various ways.

(b) National Society for the Prevention of Cruelty to Children.—I wish to make special acknowledgment to the Officer of the N.S.P.C.C. for his valuable services during the year. The calls made upon him have been particularly heavy and have arisen largely in connection with cases attending the Eye Clinic. His visits were almost entirely successful and were of great assistance to the Department. On the few occasions where his assistance was sought in cases of neglect, an immediate improvement was manifest.

(c) Skegness Seaside Home.—Every year, through the agency of this Institution, children from all over the town enjoy a week or a fortnight of happy and healthy holiday at this bracing seaside resort, and return very much the better for the change. In assessing the various factors which tend to make and keep the school children of Derby healthy, this Institution undoubtedly takes a very high place.

BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

The methods adopted for ascertaining and dealing with children who are defective have been described in previous reports.

Blind.—There were no cases of blindness examined during the year.

Deaf.—One child was examined with a view to admission to a Deaf and Dumb Institution.

Epileptic.—There were no cases of Epilepsy examined during the year or institutional treatment.

Mentally Defectives.—Twenty-nine children were examined under the Mental Deficiency Act, 1913. Five were certified incapable, by reason of mental defect, of receiving benefit from instruction in a Special School or Class, three were certified incapable, by reason of mental defect, of receiving further benefit from instruction in a Special School or Class, and twenty-one were certified feeble-minded (on or before attaining the age of sixteen).

Temple House Special School.—The number of children who have had the benefit of special training in this School since its opening in 1901 is now 1028.

Admissions :—Examinations are held periodically during the year, and in 1938, 76 children were brought forward. Of these, 36 were certified as capable of receiving benefit from instruction in the Special School ; 30 were actually admitted during the year (including 3 re-admissions), and six children who were passed as suitable candidates were admitted early in 1939. Forty were found not to be mentally defective within the meaning of the Act and fit to be retained in the elementary school.

The following shows the age and sex respectively of the children admitted during the year :—

			<i>Males.</i>	<i>Females.</i>
Aged 7	...		—	2
Aged 8	...		6	5
Aged 9	...		3	3
Aged 10	...		1	2
Aged 11	...		2	2
Aged 12	...		—	3
Aged 13	...		—	—
Aged 14	...		—	1
			—	—
Totals	...		12	18
			—	—

Discharges.—The following children were discharged from the School during the year and their present occupation, as far as can be ascertained is noted :—

<i>Males.</i>		<i>Females.</i>	
C.G.	Moulder.	E.W.	Mill Hand.
D.T.	Errand Boy.	K.S.	Domestic duties at home.
J.G.H.	Labourer.	L.P.	Factory Hand.
R.R.	Foundry Hand.	R.H.	Factory Hand.
A.M.	Factory Hand.	N.D.	Domestic duties at home.
E.S.	Foundry Hand.	D.A.	Domestic Servant.
P.R.	Errand Boy.	C.H.	Left Town.
L.H.	Foundry Hand.	I.G.	Mill Hand.
A.M.	Errand Boy.	D.S.	Left Town.
E.S.	Mill Hand.	B.H.	Left Town.
W.A.T.	Garage Hand.		
J.M.	Joiner.		
H.W.	Unknown.		
F.G.	Mill Hand.		
J.W.	At Home.		
E.W.	Admitted to Private School.		
J.Y.	Apprentice at Garage.		

Work of the Local Branch of the Central Association for Mental Welfare.—

This Association has been in operation since 1931, and its objects have been detailed in a former report. During the year, 83 reports were received on children who were either in or had left Temple House Special School.

Full-time Courses of Higher Education for Blind, Deaf, Defective and Epileptic Students.—There are no centres for Higher Education or vocational training in Derby. Suitable cases requiring such training are sent to recognised Institutions elsewhere. During 1938, one girl was maintained at the British Homes for Deaf and Dumb, London, and one boy at the Home for Crippled Boys, Wright's Lane, Kensington.

NURSERY SCHOOL AND CLASSES.

The Central and Training College Nursery Schools and the two recognised Nursery Classes continue to function successfully on the lines indicated in previous reports. The children are visited once or twice weekly by the School Nurse and at frequent intervals by the Medical Officer. Every child is medically examined at least once per year and treatment inaugurated for any defects.

The number of children examined at the various schools was :—

<i>School.</i>	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Central ...	72	70	142
Training College	22	11	33
Trinity ...	41	49	90
Firs Estate ...	—	48	48
Totals ...	135	178	313

SECONDARY SCHOOLS AND OTHER INSTITUTIONS OF HIGHER EDUCATION.

The number of Secondary Schools in Derby is five, viz., The Bemrose School (Boys), Parkfields Cedars Secondary School for Girls, The Derby School (Boys), The Junior School of Art (Boys and Girls), and Homelands Secondary School (Girls).

Accommodation.

The Bemrose School	...	...	...	...	680
Parkfields Cedars Secondary School for Girls...	...				450
The Derby School	...	...	...	...	390
Junior School of Art	...	...	...	...	72
Homelands Secondary School	...	...	...	...	480
					2,072

Medical Inspection.—The requirements of the Board with regard to medical inspection have been carried out, all the schools having been inspected during the year. A complete examination, however, was undertaken only for the entrants, twelve and fifteen year old pupils, and any others whom it was thought necessary to examine. Any defects requiring attention are brought to the notice of the parents, together with an offer of any treatment available at the School Clinic. Pupils who do not receive treatment at the Clinic are re-inspected after six months, unless they are known by earlier examination to be definitely remedied.

The total number of pupils inspected was 1,785. Of these, 985 were boys and 800 girls. The increase is due to the opening of the Homelands Secondary School which replaced the Central School for Girls, the latter having been listed as an elementary school.

Treatment.—The forms of treatment available at the Clinic include minor ailments, dental, ophthalmic, nose and throat, ultra-violet rays and orthopaedic, the conditions regarding payment being similar to those for Elementary School children, with the exception of dental treatment, for which an annual fee of 5s. is charged. The following shows the number of defects treated at the Clinic :—

Visual Defects	...	...	...	162
Dental Defects	...	...	...	437
Other Defects	...	...	...	110

Other Examinations.—

Before Boxing Tournament	20
--------------------------	-----	-----	-----	----

Continuation Schools.—The School Medical Service has not up to the present dealt with Continuation Schools.

PARENTS' PAYMENTS.

No charge is made to parents in respect of treatment of minor ailments, skin, ultra-violet ray, aural (except operation), ophthalmic (except cost of glasses), and orthopaedic (except Hospital and Appliances).

For operations for tonsillectomy, a charge of 13s. is made to the parents if the operation is performed at the City Hospital. This amount covers the entire expense, and there is no cost to the Education Committee. In exceptional cases, however, part payment of this sum may be defrayed by the Authority.

Dental Treatment.—For Elementary School children, no definite scale is employed. Parents, however, are informed that some contribution to the cost of treatment is expected. For Secondary School children an annual charge of 5s. is made.

Orthopaedic Treatment in Hospital.—No definite scale is in operation. All the home circumstances, however, are considered, and a weekly charge made accordingly.

Spectacles.—Parents pay for the spectacles themselves, except in such cases where, on account of poverty, the glasses are not likely to be obtained. In these cases, some assistance is given by the Education Authority.

HEALTH EDUCATION.

General health education is carried on in the schools by the education staff, and the Board's Handbook of Suggestions on Health Education is followed extensively. The Senior Dental Officer, however, gives periodic lectures to the senior children in the elementary schools. Up to now no systematic health education has been undertaken by the Medical Staff.

EMPLOYMENT OF SCHOOL CHILDREN.

During the year, 239 children were examined as to their fitness to undertake employment, two of whom were certified unfit. At the end of the year there were 341 children registered to work for 106 employers, the majority being engaged on newspaper delivery.

THE WORK OF THE SCHOOL NURSES.

Seven nurses, including one employed whole-time on orthopaedic work, are engaged on the work of the School Medical Services. In addition, two nurses are employed on half-time Health and half-time School Medical Services.

Home Visits.

Infectious Diseases	...	...	...	...	18
Re Spectacles	...	...	...	...	455
Re Nose and Throat Defects	...	...	...	...	404
Re Orthopaedic Defects	...	...	...	...	148
Re Ultra-violet Rays...	...	...	...	...	134
Re Skin Defects	...	...	...	...	35
Unsuccessful	...	...	...	...	436
Miscellaneous	...	...	...	...	223
Total					1,853

Visits to Schools.

Number of sessions devoted to vermin inspections	...	...	267
Miscellaneous	...	...	64

Visits to Nursery Schools.

Number of visits paid	179
-----------------------	-----	-----	-----

Clinics.

Minor Ailments Clinic, Mill Hill Lane	...	...	265
Do. Green Street	...	...	160
Do. Brighton Road School	...	...	86
Do. Pear Tree School	...	...	83
* Do. Traffic Street School	...	...	52
Do. Firs Estate School	...	...	83
Do. Nightingale Road School	...	...	153
Do. Nottingham Road School	...	...	159
Consultation Clinic, Mill Hill Lane	...	...	273
Ophthalmic Clinic, Mill Hill Lane	...	...	216
Skin Clinic, Mill Hill Lane...	...	...	43
Aural Clinic, Mill Hill Lane	...	...	33
Ultra-violet Ray Clinic, Green Street	...	...	119
Do. Mill Hill Lane	...	...	374
Orthopædic Clinic, Mill Hill Lane	...	...	350

* Re-opened May, 1938.

Vermin Clinics.

Total number of cases attended :—

Body Vermin	...	...	12
Verminous Head	...	...	220
Total number of attendances	...	...	835

Further particulars in connection with this work are given in Appendix, Table IV., Group 6.

MISCELLANEOUS WORK.

Teachers.—The total number of teachers examined during the year after absence from duty owing to illness was 28.

Home Office Schools.—Eleven children were examined during the year.

Schools Camp.—597 children were examined before proceeding to the annual Schools Camp at Abergcle—381 boys and 216 girls.

Skegness Seaside Home.—320 children were examined before proceeding to the Derby and Derbyshire Children's Seaside Home.

Entertainments.—43 children were examined and certified fit to take part in entertainments.

School Journeys.—157 children were examined before proceeding on school journeys.

Boarding Out.—Examinations were carried out on 34 children who were in the care of the Local Authority.

British Legion Camp.—At the request of the British Legion 11 children were examined before proceeding to their Summer Camp.

Ministry of Labour.—3 boys were examined as to their fitness to undertake work on farms.

National Health Insurance.—The records of 328 school leavers were forwarded to the office of the National Health Insurance Committee during the year.

Child Guidance.—There is nothing fresh to report under this heading. As in previous years, several delinquent and difficult children have been referred for examination and advice, but there is no clinic specially organised for this aspect of child health.

SPECIAL ENQUIRY.

By Dr. Wilfred Lomax, Assistant Medical Officer.

VISUAL DEFECTS IN EIGHT-YEAR-OLD CHILDREN DURING THE PERIOD 1934—1938.

In the Annual Report of the Medical Officer of Health for the year 1937, comment was made on the continued reduction in numbers of children aged eight who showed some visual defect, as opposed to the steady increase which had occurred previous to 1934. The tests have remained unaltered and the staff showed little change during this period. Moreover, check tests have been done at the Central School Clinic under standardised conditions and the results invariably agreed.

With a view to ascertaining any cause or group of causes which might have brought about this improvement the present enquiry was made. It was decided to compare the 1934 group of children with defective vision with the corresponding group for 1938. The figures quoted in the above-mentioned report were from 1934 to 1937, and the improvement was seen to have occurred in both boys and girls. It is now possible to add the statistics for 1938.

The figures give the percentage of children with such a defect as to be unable to read 6/12 (Snellin type) with either one or both eyes, as found at routine medical inspection of eight-year-old children.

<i>Year.</i>	<i>8-year boys.</i>	<i>8-year girls.</i>
1934	14.2	14.7
1935	10.5	12.5
1936	9.2	9.6
1937	5.5	5.3
1938	5.5	10.1

Unfortunately for this enquiry, it will be seen that in 1938, although the low figure for boys was maintained, there was an increase in the figure for the girls' group.

Information as to the type of defective vision, the relationship to school lighting, and the natural lighting of the home was obtained from school medical records, but some method of obtaining information as regards hours of sleep, frequency of visits to cinemas, financial status of parent, etc., was required, and for this purpose a questionnaire was sent to every parent whose child had defective vision when examined at eight years of age in 1934 or 1938. It was necessary to make some slight alteration in the questionnaire depending on whether the information required referred to 1934 or 1938. A form of questionnaire is appended. The response was excellent and an analysis of the information was undertaken. In addition, similar information relating to all children aged eight was obtained in school for use as a control.

A list of possible causes of improved vision was drawn up, and it is proposed to discuss each of these separately. The order of the list was chosen at random, and was not intended to convey any impression as to relative importance.

The children under review were 141 boys and 144 girls in 1934, and 50 boys and 87 girls in 1938.

1. Type of Defect.—

DIAGNOSIS.	BOYS.				GIRLS.			
	1934.		1938.		1934.		1938.	
		%		%		%		%
Simple hypermetropia ...	36 (5)	27.9	17 (6)	35.4	43 (18)	31.4	16 (6)	20.3
Simple myopia ...	6	4.6	1	2.1	8	5.8	4	5.0
Hypermetropia and Astigmatism ...	66 (9)	51.2	25 (9)	52.0	65 (9)	47.4	46 (10)	58.2
Myopia and Astigmatism ...	3	2.3	2	4.2	5 (1)	3.6	4 (1)	5.0
Mixed Astigmatism	13 (1)	10.1	1	2.1	10 (1)	7.3	7	8.9
Myopia and Hypermetropia ...	4	3.1	—	—	4	2.9	1 (1)	1.3
Myopia, Hypermetropia and Astigmatism ...	—	—	1	2.1	2	1.5	1	1.3
Injury to eye ...	1	0.8	—	—	—	—	—	—
Cataract ...	—	—	1	2.1	—	—	—	—
No diagnosis ...	12	—	2	—	7	—	8	—
	141 (15)		50 (15)		144 (29)		87 (18)	

The figures in parenthesis indicate the number of children who had a strabismus as well as defective vision.

Boys $\left\{ \begin{array}{l} 1934-11.6\% \\ 1938-31.2\% \end{array} \right.$

Girls $\left\{ \begin{array}{l} 1934-21.2\% \\ 1938-22.8\% \end{array} \right.$

No diagnosis was obtainable in a few cases owing to the non-attendance of children referred to the Ophthalmic Clinic for full examination or due to removal of the family to another district.

Conclusion.—The only definite change was a marked increase in the percentage of boys with defective vision in 1938 who also had a Strabismus. Comparison of other groups in this classification showed no significant change.

2. Heredity.—

Comment had been made by medical officers in charge of refraction clinics on the number of children in whose family there was some other member wearing glasses, and it was considered necessary to investigate this matter. The proportion of children aged eight where some other member of the immediate family (father, mother, brother or sister) wore glasses was :—

1934	Boys—51%	1934	Girls—48%
1938	Boys—48.8%	1938	Girls—58%

In the control group of 1,637 children aged eight, some other member of the family wore glasses in 841 (51.4%) cases.

The results are therefore regarded as insignificant.

3. Previous illnesses of children.—

Of those illnesses most likely to affect vision, the most frequent history was of Measles and Whooping Cough. These appeared with equal frequency in all groups. "Injury," "Operation to eye," "Ulcers of eye," and "Small pox with affected eyes," appeared as single items in the list of previous illnesses.

4. Social Status.—

When the questionnaire was arranged, it was realised that any question as to the parent's income would immediately lose the co operation of a large number of parents. Consequently, it merely asked for the occupation of the parent and whether or not he was in employment. From the answers obtained, an attempt was made to assess the social status.

The groups were classified as :—

- (a) Steady average income, *e.g.*, skilled workman, clerk, shopkeeper.
- (b) Steady income but lower than group (a), *e.g.*, unskilled labourer.
- (c) Poor and fluctuating income, *e.g.*, unemployed, father of child dead.

<i>Boys.</i>			<i>Girls.</i>	
	1934.	1938.	1934.	1938.
Group (a) ...	52.8%	50.0%	55.3 %	52.2%
Group (b) ...	32.1 %	42.1%	25.0%	24.6%
Group (c) ...	15.1%	7.9%	19.7%	23.2%

The apparent improvement in the boys' group is offset by a slight deterioration in the girls' group, and it is doubtful whether any conclusions can be drawn from these findings.

5. Home Lighting.—

This heading must be regarded as important, considering that a child spends a greater proportion of its time at home than at school.

(a) *Natural Lighting*.—The standard taken was arbitrary and was not based on any scientific measurement, *e.g.*, foot candles, etc. The natural lighting was recorded as either good or bad.

<i>Lighting.</i>	<i>Boys.</i>		<i>Girls.</i>	
	1934.	1938.	1934.	1938.
Good ...	53.2%	88%	71.5%	81.1%
Bad ...	16.8%	12%	28.5%	18.9%

It will be observed that a small but definite improvement has occurred in both groups.

(b) *Artificial Lighting*.—The findings were as follows :—

<i>Lighting</i>	<i>Boys.</i>		<i>Girls.</i>	
	1934.	1938.	1934.	1938.
Oil ...	0.8%	—	—	—
Gas ...	8.3%	9.8%	9.8%	10.9%
Electricity ...	90.9%	90.2%	90.2%	89.1%

These figures give no indication of any change during the past four years likely to affect the vision of children living in these houses.

The figures for the control group of children aged eight were :—

Oil ...	0.1%
Candle ...	0.1%
Gas ...	7.0%
Electricity ...	92.8%

6. Attendance at Cinema.—

It was known that a large percentage of children attended picture houses but there were no figures available to show how frequent were the attendances, or the position relative to the screen of the seats generally occupied.

	<i>Boys.</i>		<i>Girls.</i>		<i>Control group Boys and Girls, 1938.</i>
	1934.	1938.	1934.	1938.	
Bi-weekly ...	12.6%	2.4%	9.8%	1.4%	11.5%
Weekly ...	55.4%	46.3%	32.5%	40.5%	51.6%
Monthly ...	12.6%	9.8%	6.5%	9.5%	19.8%
Yearly or never	19.4%	41.5%	51.2%	48.6%	17.0%
Front... ..	11.3%	20.0%	13.2%	21.6%	
Centre ...	29.6%	30.0%	25.0%	31.4%	
Back ...	59.1%	50.0%	61.8%	47.0%	

The percentage of bi-weekly attenders fell considerably and this must be looked upon as the most important group. There was very little change to report in the other groups or in the distance of the seats from the screen.

7. Hours of Sleep.—

Recently, several school medical officers have made enquiries as to the hours of sleep of school children, and the results invariably have shown a high percentage of children having insufficient sleep. Short hours of sleep during childhood must throw a correspondingly greater strain on vision. The minimum number of hours of sleep recommended by Still for a child of eight was eleven hours per night. Using this figure as a basis, the following analysis was made:—

	<i>Boys.</i>		<i>Girls.</i>		<i>Control group Boys and Girls, 1938.</i>
	1934.	1938.	193	1938.	
Below 11 hours	62.0%	40.0%	47.9%	17.6%	14.3%
11 hours and above	38.0%	60.0%	52.1%	82.4%	85.7%

These figures show definite improvement in the hours of sleep of children included in this survey, and this is suggested as an important factor in the reduction of visual defects. The figures for the defective group of children are still inferior to those for the control group of 1,441 children.

8. Sewing at home.—

Eight-year-old girls did less sewing at home in 1938 than in 1934, but the difference was small, and could have little effect on the percentage of visual defects. The time occupied each evening was probably restricted to a few minutes.

1934 — 23.6%

1938 — 16.2%

9. Homework.

From the information obtained from schools it appears that one or two schools still have set homework for eight-year-old children despite the recommendations of the Board of Education Pamphlet No. 110. Approximately 11% of all eight-year-olds did some homework, either voluntarily or compulsorily. As regards the children with defective vision who did homework, there has been a marked reduction in numbers between 1934 and 1938.

<i>Year.</i>	<i>Percentage doing Homework.</i>	
	<i>Boys.</i>	<i>Girls.</i>
1934	12.6%	9.8%
1938	2.4%	2.7%

The amount of homework done each evening was only one hour, but this diminution must be regarded as favourable.

In close association with the question of homework is that of reading at home. Too often, the book or paper is badly printed and on cheap paper, and consequently the reduction in numbers of children who read at home is desirable.

<i>Year.</i>	<i>Percentage who read at home.</i>	
	<i>Boys.</i>	<i>Girls.</i>
1934	81.5%	60.9%
1938	48.8%	50.0%

10. Distribution in Schools.—

An analysis of the proportion of eight-year-old children with defective vision at every school in the Borough was made, and it was soon apparent that from the point of view of the enquiry, a few schools contained a much higher proportion of children with defective vision than did the others. In 1934, the outstanding schools were :—

		<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
All Saints'	... ..	31.2%	33.3%	32.1%
St. Paul's	... ..	21.4%	33.3%	26.5%
Orchard Street	... ..	21.1%	25.0%	22.6%
Nuns Street	... ..	13.6%	30.4%	22.2%
Traffic Street	... ..	23.9%	16.7%	21.5%
Average for all schools...		14.2%	14.7%	14.5%

In 1938, the order was :—

		<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Orchard Street	... ..	10.0%	35.7%	25.0%
St. Anne's	... ..	23.1%	20.0%	22.2%
St. Chad's	... ..	15.4%	30.0%	21.7%
Nuns Street	... ..	16.7%	25.0%	20.0%
Average for all schools ...		5.5%	10.1%	7.7%

A complete list showing the percentages for every school is appended. It will be seen that certain schools were outstandingly good or bad, both in 1934 and in 1938, but it must be realised that the schools with apparently bad records draw their scholars from homes which are financially poor and which have poor natural and artificial lighting. It is impossible to separate these contributing causes and to assign importance to any particular item.

From a list kindly supplied by the Borough Architect, it was found that the only structural alteration likely to improve the lighting in schools under the Local Education Authority during the period 1934/8 was the provision of electric lighting in all departments of Brighton Road School in 1934/5, and in St. Luke's School.

SUMMARY.

1. An enquiry has been made to ascertain any factors which may have contributed to the improvement in vision of eight-year-old children from 1934 to 1938.

2. Improved hours of sleep is suggested as the most outstanding item and this has probably been assisted by better natural lighting of the home, less homework and reading at home, and reduction in the number of bi-weekly attenders at cinemas, especially those occupying seats near the screen.

3. There is no statistical evidence that sewing at home, artificial lighting at home, or social status have changed during the last four years.

1934.

<i>Schools.</i>	<i>Routines.</i>		<i>No. Defective.</i>			<i>% Defective.</i>		
	<i>Boys.</i>	<i>Girls.</i>	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Allenton ...	59	55	4	4	8	6.8	7.3	7.0
All Saints' ...	16	12	5	4	9	31.2	33.3	32.1
Ashbourne Road...	90	85	7	10	17	7.8	11.8	9.7
Boulton ...	42	42	6	9	15	14.3	21.4	17.9
Brighton Road ...	29	37	1	5	6	3.4	13.5	9.1
Christ Church ...	14	28	4	4	8	28.6	14.3	19.0
Clarence Road ...	36	39	4	5	9	11.1	12.8	12.0
Firs Estate ...	56	43	8	5	13	14.3	11.6	13.1
Gerard Street ...	25	46	3	9	12	12.0	19.6	16.9
Kedleston Road ...	—	—	—	—	—	—	—	—
Nightingale Road	83	56	12	3	15	14.4	5.4	10.8
Normanton ...	27	27	4	2	6	14.8	7.4	11.1
Nottingham Road	48	54	5	2	7	10.4	3.7	6.9
Nuns Street ...	22	23	3	7	10	13.6	30.4	22.2
Orchard Street ...	19	12	4	3	7	21.1	25.0	22.6
Pear Tree ...	44	55	5	9	14	11.4	16.4	14.1
Practising ...	10	33	2	5	7	20.0	15.2	16.3
Reginald Street ...	—	—	—	—	—	—	—	—
Sinfin ...	17	18	1	—	1	5.9	—	2.9
St. Andrew's ...	36	33	7	8	15	19.4	24.2	21.7
St. Anne's ...	20	26	3	6	9	15.0	23.1	19.6
St. Chad's ...	1	1	—	1	1	—	100.0	50.0
St. Dunstan's ...	21	24	1	3	4	4.8	12.5	8.9
St. James' Church	49	—	7	—	7	14.3	—	14.3
St. James' Road	45	53	8	11	19	17.8	20.8	19.4
St. John's ...	19	15	5	2	7	26.3	13.3	20.6
St. Joseph's ...	22	19	6	2	8	27.3	10.5	19.5
St. Luke's ...	18	14	3	3	6	16.7	21.4	18.7
St. Mary's ...	21	13	2	3	5	9.5	23.1	14.7
St. Paul's ...	28	21	6	7	13	21.4	33.3	26.5
St. Peter's ...	4	22	2	3	5	50.0	13.6	19.2
St. Thomas' ...	—	23	—	—	—	—	—	—
Temple House ...	7	6	—	—	—	—	—	—
Traffic Street ...	41	24	10	4	14	23.9	16.7	21.5
Wilmorton ...	25	18	3	5	8	12.0	27.8	18.6
Totals ...	994	977	141	144	285	14.2	14.7	14.5

1938.

<i>Schools.</i>	<i>Routines.</i>		<i>No. Defective.</i>			<i>% Defective.</i>		
	<i>Boys.</i>	<i>Girls.</i>	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Allenton ...	38	33	3	7	10	7.9	21.2	14.1
All Saints' ...	12	15	—	—	—	—	—	—
Ashbourne Road...	62	45	3	7	10	4.8	15.6	9.3
Boulton ...	68	63	6	9	15	8.8	14.3	11.5
Brighton Road ...	17	18	—	1	1	—	5.6	2.9
Christ Church ...	22	11	—	1	1	—	9.1	3.0
Clarence Road ...	18	—	—	—	—	—	—	—
Firs Estate ...	40	27	1	2	3	2.5	7.4	4.5
Gerard Street ...	46	25	2	3	5	4.3	12.0	7.0
Kedleston Road ...	1	—	—	—	—	—	—	—
Nightingale Road	68	62	3	8	11	4.4	12.9	8.5
Normanton ...	41	52	2	4	6	4.9	7.7	6.5
Nottingham Road	74	74	7	5	12	9.5	6.8	8.1
Nuns Street ...	12	8	2	2	4	16.7	25.0	20.0
Orchard Street ...	10	14	1	5	6	10.0	35.7	25.0
Pear Tree ...	23	51	1	2	3	4.3	3.9	4.1
Practising ...	1	44	—	3	3	—	6.8	6.7
Reginald Street ...	7	5	—	—	—	—	—	—
St. Andrew's ...	—	1	—	—	—	—	—	—
St. Anne's ...	13	5	3	1	4	23.1	20.0	22.2
St. Chad's ...	13	10	2	3	5	15.4	30.0	21.7
St. Dunstan's ...	9	6	2	—	2	22.2	—	13.3
St. James' Church	48	10	—	—	—	—	—	—
St. James' Road	59	67	3	—	3	5.1	—	2.4
St. John's ...	25	19	1	2	3	4.0	10.5	6.8
St. Joseph's ...	14	19	—	1	1	—	5.3	3.0
St. Luke's ...	17	13	2	1	3	11.8	7.7	10.0
St. Mary's ...	31	21	2	5	7	6.5	23.8	13.5
St. Paul's ...	15	14	2	1	3	13.3	7.1	10.3
St. Peter's ...	—	8	—	—	—	—	—	—
St. Thomas' ...	—	34	—	5	5	—	14.7	14.7
Sinfin ...	15	12	—	—	—	—	—	—
Temple House ...	6	4	—	—	—	—	—	—
Traffic Street ...	57	52	2	8	10	3.5	15.4	9.2
Wilmorton ...	26	18	—	1	1	—	5.6	2.3
Totals ...	908	860	50	87	137	5.5	10.1	7.7

Copy of Questionnaire.

DERBY EDUCATION COMMITTEE.

SCHOOL MEDICAL DEPARTMENT,

TEMPLE HOUSE,

Telephone No. 2477.

MILL HILL LANE,

Extension 63.

DERBY.

—————1939.

MR. _____,

DERBY.

Dear Sir,

An enquiry is being made with regard to any possible causes of good or bad vision, and I am asking for your co-operation in this respect. I should be grateful therefore if you would kindly answer the questions below with reference to your child _____. *This information should apply to the time when your child was eight years of age, namely, in 1934.* A stamped addressed envelope is enclosed for the return of this form.

With many thanks in advance.

Yours very truly,

ALEX. MORRISON,

School Medical Officer.

Parent's occupation (State if employed).....

Previous illnesses of child.....

Hours of sleep.....

Homework—Number of hours each evening.....

Reading at home—Number of hours each evening.....

Sewing at home—Number of hours each evening.....

Lighting of house—Gas or Electric.....

How often does child attend the Cinema ?

and does child sit at front or back ?.....

Do any other members of family wear glasses ?.....

APPENDIX.

TABLE I.—MEDICAL INSPECTIONS OF CHILDREN ATTENDING PUBLIC
ELEMENTARY SCHOOLS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups :—

Entrants	...	...	...	...	...	...	2,746
Second Age Group	...	...	...	...	...	...	2,301
Third Age Group	...	...	...	...	...	...	2,248
							—
Total							7,295
Number of other Routine Inspections							—
							—
Grand Total							7,295
							—

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	6,654
Number of Re-Inspections	...	...	...	...	22,671
					—
Total					29,325
					—

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

Number of individual Children found at Routine Medical Inspection to require
Treatment (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

Group.	For defective vision (excluding squint).	For all other conditions recorded in Table II A.	Total.
Entrants	5	535	539
Second Age Group ...	121	348	451
Third Age Group ...	182	249	415
Total (Prescribed Groups)	308	1,132	1,405
Other Routine Inspections	—	—	—
Grand total	308	1,132	1,405

TABLE II.

**A. Return of Defects found by Medical Inspection in the year ended
31st December, 1938.**

DEFECT OR DISEASE.					ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
					No. of Defects.		No. of Defects.	
					Requiring Treatment.	Requiring to be kept under observation, but <i>not</i> requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but <i>not</i> requiring Treatment.
Skin	{	(1) Ringworm—Scalp	4	—	54	—		
		(2) „ Body	5	—	73	—		
		(3) Scabies	7	—	181	—		
		(4) Impetigo	28	—	1205	—		
		(5) Other Diseases (Non-Tuber- culous)	70	22	2488	30		
	TOTAL (Heads 1 to 5)...		114	22	4001	30		
Eye	{	(6) Blepharitis	31	24	316	24		
		(7) Conjunctivitis	19	1	303	1		
		(8) Keratitis	1	1	8	—		
		(9) Corneal Opacities	—	1	1	1		
		(10) Other Conditions (excluding Defective Vision and Squint)	11	7	435	9		
	TOTAL (Heads 6 to 10)		62	34	1063	35		
Ear	{	(11) Defective Vision (excluding Squint)	308	283	741	366		
		(12) Squint	111	61	240	124		
		(13) Defective Hearing	51	41	106	42		
	{	(14) Otitis Media	46	18	382	25		
		(15) Other Ear Diseases	29	4	416	9		
Nose and Throat	{	(16) Chronic Tonsillitis only	19	127	61	252		
		(17) Adenoids only	18	37	50	40		
		(18) Chronic Tonsillitis and Adenoids... ..	47	32	157	40		
		(19) Other Conditions	86	596	463	1034		
(20) Enlarged Cervical Glands (Non-Tuber- culous)...			6	17	94	82		
(21) Defective Speech			18	48	240	77		

TABLE II. A. (continued).

DEFECT OR DISEASE.					ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
					No. of Defects.		No. of Defects.	
					Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.
Heart and Circulation	Heart Disease :							
	(22)	Organic	...	...	31	8	55	10
	(23)	Functional	...	...	32	353	141	695
	(24)	Anaemia	...	...	19	145	95	175
Lungs	(25)	Bronchitis	...	...	135	346	511	492
	(26)	Other Non-Tuberculous Diseases	...	...	10	39	38	46
	Pulmonary :—							
Tuberculosis	(27)	Definite	...	...	1	5	3	13
	(28)	Suspected	...	...	—	3	3	9
	Non-Pulmonary :—							
	(29)	Glands	...	...	2	4	5	5
	(30)	Bones and Joints	...	...	2	2	13	5
	(31)	Skin	...	...	—	—	—	—
(32) Other Forms					—	—	—	—
TOTAL (Heads 29 to 32)					4	6	18	10
Nervous System	(33)	Epilepsy	...	...	7	6	14	12
	(34)	Chorea	...	...	1	3	29	4
	(35)	Other Conditions	...	...	10	17	65	71
Deformities	(36)	Rickets	...	...	68	61	82	55
	(37)	Spinal Curvature	...	...	66	154	143	222
	(38)	Other Forms	...	...	33	32	160	65
(39) Other Defects and Diseases (excluding Defects of Nutrition, Uncleanliness and Dental Diseases)					216	303	13,651	714
Total No. of Defects					1,548	2,801	23,022	4,749

TABLE II.—B.

Classification of the Nutrition of Children Inspected during the Year in the Routine Age Groups.

Age-groups	Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants ...	2746	221	8.05	2168	78.95	357	13.00	—	—
Second Age-group	2301	192	8.34	1777	77.23	325	14.12	7	0.30
Third Age-group	2248	211	9.39	1851	82.34	185	8.23	1	0.04
Other Routine Inspections ...	—	—	—	—	—	—	—	—	—
TOTAL ...	7295	624	8.55	5796	79.45	867	11.88	8	0.11

TABLE III.—Return of all Exceptional Children in the Area.**BLIND CHILDREN.**

At Certified Schools for the Blind.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
3	—	—	—	3

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	18	—	—	18

DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
18	—	—	—	18

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	1	—	—	1

MENTALLY DEFECTIVE CHILDREN.**Feeble-Minded Children.**

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
123	—	—	1	124

EPILEPTIC CHILDREN.**Children suffering from severe Epilepsy.**

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
2	1	—	4	7

PHYSICALLY DEFECTIVE CHILDREN.**A. TUBERCULOUS CHILDREN.****I.—Children suffering from Pulmonary Tuberculosis.**

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	29	1	5	36

II.—Children suffering from Non-Pulmonary Tuberculosis.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
5	22	2	5	34

B. DELICATE CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	162	—	1	163

C. Crippled Children.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	78	4	5	88

D. Children with Heart Disease.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	—	—	4	4

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Combination of Defect.	At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
Pulmonary Tuberculosis and Feeble-minded ...	1	—	—	—	1
Crippled and Feeble-minded	3	—	—	—	3

TABLE IV.**Treatment Tables.****Group I.—Minor Ailments (excluding Uncleanliness, for which see Table VI).**

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin :—			
Ringworm Scalp—			
(i.) X-Ray Treatment	—	—	—
(ii.) Other "	57	1	58
Ringworm Body	76	2	78
Scabies	181	6	187
Impetigo	1221	9	1230
Other Skin Disease	2490	56	2546
Minor Eye Defects	1035	62	1097
(External and other, but excluding cases falling in Group II.)			
Minor Ear Defects	875	123	998
Miscellaneous	11217	260	11477
(e.g., minor injuries, bruises, sores, chil- blains, etc.)			
Total	17152	519	17671

Group II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects Treated as Minor Ailments.—Group I.)

	No. of Defects dealt with.		
	Under the Authority's Scheme	Otherwise.	Total.
ERRORS OF REFRACTION (including squint).	1,142	6	1,148
Other defect or disease of the eyes (excluding those recorded in Group I.)	—	—	—
Total	1,142	6	1,148
	Under the Authority's Scheme.	Otherwise.	Total.
No. of Children for whom spectacles were			
(a) Prescribed	1,033	6	1,039
(b) Obtained	912	6	918

GROUP III.

TREATMENT OF DEFECTS OF NOSE AND THROAT.

Number of Defects.													
Received Operative Treatment.												Received other forms of treatment.	Total number treated.
Under the Authority's Scheme, in Clinic or Hospital.				By Private Practitioner or Hospital, apart from the Authority's Scheme				Total.					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
9	7	67	—	35	27	232	11	44	34	299	11	314	702

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and adenoids. (iv) Other defects of the nose and throat.

Group IV.—Orthopædic and Postural Defects.

	Under the Authority's Scheme.			Otherwise.			Total number treated.
	Residential treatment with education.	Residential treatment without education.	Non-residential treatment at an orthopædic clinic.	Residential treatment with education.	Residential treatment without education.	Non-residential treatment at an orthopaedic clinic.	
Number of children treated	2	14	325	—	12	57	400

Table V. Dental Inspection and Treatment.

(1) Number of children inspected by the Dentist

(a) Routine age-groups

AGE	5	6	7	8	9	10	11	12	13	14	TOTAL
Number	1805	1587	1767	1931	1985	2019	1961	1745	1708	313	16,821

(b) Specials 97

(c) TOTAL (Routine and Specials) 16,918

(2) Number found to require treatment 12,267

(3) Number actually treated 8,094

(4) Attendances made by children for treatment 9,925

(5) Half-days devoted to :—

Inspection 156

Treatment 1,525

Total 1,681

(7) Extractions :—

Permanent Teeth ... 3,118

Temporary Teeth ... 11,145

Total 14,263

(8) Administrations of general
anæsthetics for extractions 6,256

(6) Fillings :—

Permanent Teeth ... 6,030

Temporary Teeth ... 2

Total 6,032

(9) Other Operations :—

Permanent Teeth ... 209

Temporary Teeth ... 7

Total 216

Table VI.—Uncleanliness and Verminous Conditions.

(i.) Average number of visits per school made during the year by
the School Nurses 6

(ii.) Total number of examinations of children in the Schools by
School Nurses 36,178

(iii.) Number of *individual* children found unclean 1,244

(iv.) Number of children cleansed under arrangements made by the
Local Education Authority Nil

(v.) Number of cases in which legal proceedings were taken :—

(a) Under the Education Act, 1921 Nil

(b) Under School Attendance Byelaws 1

APPENDIX.

TABLE I.

Medical Inspections of Children attending Secondary Schools.

A.—Routine Medical Inspections.

Ages.	7	8	9	10	11	12	13	14	15	16	17	18	Totals.
Boys	10	26	16	42	105	174	174	189	151	73	19	6	985
Girls	..	..	..	56	112	150	169	147	101	44	19	2	800
Totals	10	26	16	98	217	324	343	336	252	117	38	8	1785

B.—Other Inspections.

Number of Special Inspections	...	...	43
Number of Re-inspections	...	...	383
Total	...	...	426

C.—Children found to require treatment.

Number of individual children found at Routine Medical Inspection to require treatment (excluding defects of Nutrition, Uncleanliness and Dental Diseases).

For Defective Vision (excluding Squint)	...	...	115
For all other conditions recorded in Table II A.			270
Total	...	...	368

TABLE II.—A. Return of Defects found by Medical Inspection in the year ended 31st December, 1938.

DEFECT OR DISEASE.					Routine Inspections		Special Inspections.	
					Number of Defects		Number of Defects	
					Requiring treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.
Skin	{	(1) Ringworm—Scalp	—	—	—	—		
		(2) „ Body	—	—	—	—		
		(3) Scabies	—	—	1	—		
		(4) Impetigo	1	—	4	—		
		(5) Other Diseases (Non-Tuberculous)	21	4	24	1		
TOTAL (Heads 1 to 5) ...			22	4	29	1		
Eye	{	(6) Blepharitis	2	6	2	—		
		(7) Conjunctivitis	2	—	2	—		
		(8) Keratitis	—	—	—	—		
		(9) Corneal Opacities	—	—	—	—		
		(10) Other Conditions (excluding Defective Vision and Squint)... ..	—	—	2	1		
		TOTAL (Heads 6 to 10)	4	6	6	1		
Ear	{	(11) Defective Vision (excluding Squint)	115	100	140	48		
		(12) Squint	7	5	7	3		
		(13) Defective Hearing	4	3	2	1		
	{	(14) Otitis Media	2	1	2	2		
		(15) Other Ear Diseases	—	1	1	—		
		(16) Chronic Tonsillitis only	3	13	1	7		
Nose and Throat	{	(17) Adenoids only	—	—	—	—		
		(18) Chronic Tonsillitis and Adenoids... ..	1	—	1	—		
		(19) Other Conditions	6	62	17	25		
(20) Enlarged Cervical Glands (Non-Tuberculous)			—	3	—	—		
(21) Defective Speech			9	11	3	—		
Heart Disease :								
Heart & Circulation	{	(22) Organic	4	2	2	—		
		(23) Functional	10	53	8	34		
		(24) Anaemia	6	9	3	5		

TABLE II. A. (continued)

Lungs	{	(25) Bronchitis	3	21	6	15
		(26) Other Non-Tuberculous Diseases	2	3	—	4
Tuber- culosis	{	Pulmonary :—				
		(27) Definite	—	—	—	—
		(28) Suspected	—	—	—	—
		Non-Pulmonary :—				
		(29) Glands	—	1	—	1
		(30) Bones and Joints	—	—	—	—
		(31) Skin	—	—	—	—
		(32) Other Forms	—	—	—	—
TOTAL (Heads 29 to 32)			—	1	—	1
Nervous System	{	(33) Epilepsy	1	2	—	—
		(34) Chorea... ..	—	—	1	—
		(35) Other Conditions	3	2	3	3
Defor- mities	{	(36) Rickets	—	1	—	—
		(37) Spinal Curvature	80	45	18	15
		(38) Other Forms	81	15	21	4
(39) Other Defects and Diseases (excluding Uncleanliness and Dental Diseases ...			41	64	40	37
Total			404	427	311	206

TABLE IV.

Return of Defects Treated during the Year ended 31st December, 1938.
Treatment Table.

Group I.—Minor Ailments.

Disease or Defect.	Number of Defects treated, or under treatment during the year		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin :—Ringworm Scalp—			
(i.) X-Ray Treatment	—	—	—
(ii.) Other Treatment	—	—	—
Ringworm Body	—	—	—
Scabies	—	1	1
Impetigo	5	—	5
Other Skin Disease	34	10	44
Minor Eye Defects	4	5	9
(External and other, but excluding cases falling in Group II.)			
Minor Ear Defects	7	2	9
Miscellaneous	23	7	30
(e.g. minor injuries, bruises, sores, chil- blains, etc.)			
Total	73	25	98

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

	No. of Defects dealt with		
	Under the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including Squint) ...	162	4	166
Other Defect or Disease of the Eyes (excluding those recorded in Group I.)... ..	—	—	—
TOTAL	162	4	166
	Under the Authority's Scheme.	Otherwise.	Total.
No. of children for whom spectacles were			
(a) Prescribed	156	4	160
(b) Obtained... ..	150	4	154

Group III.—Treatment of Defects of Nose and Throat.

Number of Defects.													
Received Operative Treatment.												Received other forms of treatment.	Total number treated.
Under the Authority's Scheme, in Clinic or Hospital.				By Private Practitioner or Hospital, apart from the Authority's Scheme				Total.					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
—	—	—	—	1	—	3	2	1	—	3	2	16	22

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids.
(iv) Other defects of the nose and throat.

Group IV. Orthopædic and Postural Defects.

	Under the Authority's Scheme.			Otherwise.			Total number treated
	Residential treatment with education	Residential treatment without education	Non-residential treatment at an Orthopædic Clinic	Residential treatment with education	Residential treatment without education	Non-residential treatment at an Orthopædic Clinic	
No. of children treated	—	1	20	—	1	2	23

Table V. Dental Inspection and Treatment.

(1) Number of Children who were:—

(a) Inspected by the Dentist:

Routine Age Groups Nil.

Specials 437

(b) Found to require treatment 437

(c) Actually treated 437

(2) Attendances made by children for treatment 1199

(3) Half-days devoted to	{ Inspection —	Total	..	—
	{ Treatment —			

(4) Fillings	{ Permanent Teeth 1116	Total	..	1116
	{ Temporary Teeth Nil			

(5) Extractions	{ Permanent Teeth 249	Total	..	352
	{ Temporary Teeth 103			

(6) Administrations of general anæsthetics for extractions .. 249

(7) Other operations	{ Permanent Teeth 38	Total	..	40
	{ Temporary Teeth 2			

iv.--PREVALENCE OF, AND
CONTROL OVER, INFECTIOUS
AND OTHER DISEASES.

INCLUDING REPORTS BY

DR. HAIGH, Senior Assistant Medical Officer of Health ;

AND

DR. RICHARDS, Venereal Diseases Medical Officer.

The Chief Medical Officer of the Ministry of Health, in his Annual Report for 1937 makes many interesting comments on Mortality in Childhood, past and present.

Comparison between the death rates of recent and past years show a marked saving of child-life, the least satisfactory being in deaths from violence (*burns and scalds and road accidents*).

Large variations in mortality are still to be found between geographical and administrative areas of the country ; the rates being excessive in northern counties as compared with the south and east, and also in County Boroughs as compared with Rural Districts.

The figures over a period of years may be taken as one measure of the standard of achievement in the carrying out of a broad public health policy, dealing with the remediable factors of *housing, overcrowding and nutrition*, efficient child welfare services, enlightened home and administrative control of communicable disease, together with the practice of prevention.

Taking the country as a whole, "about three-quarters of the deaths that take place at ages 1—5 years are registered under eight headings, viz. :—the four main infectious diseases of childhood (measles, diphtheria, whooping cough and scarlet fever), tuberculosis, mainly in its non-respiratory forms, bronchitis and pneumonia, diarrhoea and enteritis, and violence in its many aspects."

Therefore every detail in the general administrative programme of the Infectious Disease service is of importance as a life-saving work, and its success or failure must depend broadly on the adequacy of the other public health measures which affect child nurture and environment.

The standards of the past are being replaced by new—parental education is vastly improved, and home nurture has produced healthier children, more prepared to meet infection should it assail. On such better foundation it is reasonable to build a newer outlook, that of prevention. The successful appeal for the recognition of the value of diphtheria prophylaxis as an insurance of child-life is certainly based in part on fear, but there is evidence of other motives. The proof that such methods pay in enhanced freedom from community epidemics, will lead to other measures, one of which might easily be a considerable demand on the part of parents for the protection of their children from *whooping cough* and *scarlet fever*. Individual requests already occur, and have been referred to consultation with the family doctor ; on a larger scale, such would need to become community measures and would require much time and some cost ; no early visible results could be expected, but if carried out adequately their fruit would be seen after many days.

PATHOLOGICAL FACILITIES.

For ordinary purposes of diagnosis, the general practitioner may require information as to the presence of some infecting organism, and this can only be provided by trained workers in properly equipped laboratories. Such services are rendered free of charge, and as rapidly as possible, in order that scientific treatment may be instituted promptly, and lives may, perchance, be saved. The same principle applies in the diagnosis of many cases of illness admitted to General and Fever Hospitals.

Every facility is available in Derby, as the diagnostic aids made in the laboratories of the local hospitals can be supplemented and completed by the Laboratory of the Derbyshire County Council.

In dealing with the diagnosis of diphtheria, the older methods of swab, simple culture and report in 12 hours on the findings of microscopic examination are no longer adequate. Some strains of diphtheria are exceptionally dangerous and it is important to know of the presence of 'gravis' strains in any section of the community. Other cases of suspected diphtheria infection may prove, on further investigation, to be carriers of quite harmless 'diphtheroids'—organisms indistinguishable from virulent diphtheria as seen under the microscope in stained films.

The technique used at the Isolation Hospital Laboratory has been developed by Mr. Roe to provide such information and is proving to be of considerable value in the administrative work of the Department, as also to reduce time lost by exclusion from school of doubtful infections, which can be proved harmless.

Streptococcal Infections.

The importance of further diagnosis in such infections has been made manifest, especially in the practice of Municipal Midwives, who may have been exposed to infection, and both routine and special examination of their throats are advisable. Mr. Roe has now enlarged the work of the Isolation Hospital Laboratory and acquired the technique for the isolation and separation of the two main groups of haemolytic streptococci—which has meant a considerable saving to the Health Committee in reducing the charges for external laboratory examinations.

Vaccination of Infants during 1938.

Total number of births	...	...	...	...	...	2,796
Children under 12 months died un-vaccinated	...	...	...	...	...	151
Insusceptible	...	...	...	...	...	3
Postponed	...	...	...	...	...	34
Successful	...	...	...	...	...	219
Conscientious objection certificates	...	...	...	...	...	2,142

COMMUNICABLE DISEASES.

Throughout the year the Department has been kept fully occupied and the Isolation Hospital busy, happily with less overcrowding.

Scarlet Fever diminished in numbers and importance after the summer holidays.

Diphtheria on the other hand was more prevalent than in 1937; there was a distinct autumnal rise of cases, and 'gravis' infection was present in three areas of the town.

The measles epidemic of 1937 continued during the first half of 1938; whooping cough became more prevalent in the autumn, and continued to increase and spread to other districts in 1939.

Home Nursing.

Trained nursing assistance for cases of Pneumonia was provided in 39 instances, 36 of which recovered. For certain other cases the Works Welfare nurses were in attendance. Similar help was provided by the Corporation for 15 cases of Measles.

Infectious Diseases Hospital.

The hospital remained overcrowded in January and February on account of Scarlet Fever admissions; the total number of in-patient days for the year was again high. There was considerable pressure on beds for Diphtheria in the autumn, and all requests from outside authorities for the admission of their surplus cases had to be refused.

BOROUGH ISOLATION HOSPITAL—IN-PATIENT DAYS.

<i>Year.</i>	<i>Scarlet Fever.</i>	<i>Diphtheria.</i>	<i>Others.</i>
1935	10,420	11,138	3,732
1936	17,873	10,075	5,422
1937	15,952	10,078	5,915
1938	17,503	10,728	3,788

Cases of Infectious Disease Notified during 1938.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.												TOTAL CASES NOTIFIED IN EACH WARD.												Total Cases removed to Isolation Hospital.						
	At all ages	At Ages—Years.											Abbey.	Alvaston.	Arboretum.	Babington.	Becket.	Bridge.	Castle.	Dale.	Derwent.	Friar Gate.	King's Mead.	Litchurch.		Normanton.	Osmaston.	Pear Tree.	Rowditch.	Non-Residents.	
		Under 1.	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65																			65 and upwards.
Smallpox ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria (including Membranous Croup)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas ...	255	3	4	7	10	17	119	47	21	24	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	62	2	1	...	...	...	1	...	4	6	11	24	13	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Typhus Fever	657	3	16	24	37	44	241	137	52	76	21	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever	4	...	...	1	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Relapsing Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Pyrexia	75	...	...	...	...	...	...	...	3	60	12	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Fever	4	...	1	...	1	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Poliomyelitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Polio-Encephalitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Encephalitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lethargica	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	175	2	2	3	7	5	24	9	15	40	27	32	9	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pulmonary Tuberculosis	108	...	...	1	1	...	3	3	11	43	20	22	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other forms of Tuberculosis	25	...	...	...	2	2	1	...	6	2	5	4	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ophthalmia Neonatorum	41	41	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles and Rubella	1213	60	124	141	168	172	509	29	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
*Chicken-pox	490	17	22	40	46	55	271	32	2	4	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
*Whooping Cough	260	26	25	31	41	32	103	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals ...	3370	154	195	248	313	327	1272	260	121	261	101	89	29	187	319	195	124	98	94	180	164	283	254	155	193	299	430	168	168	59	903

* Not compulsorily notifiable.

Notifiable Diseases during the Year.

DISEASE.				<i>Total Cases Notified</i>	<i>Cases admitted to Hospitals</i>	<i>Total Deaths.</i>
Smallpox	...	...	...	...	...	...
Diphtheria	...	...	...	255	227	7
Scarlet Fever	...	...	...	657	471	1
Enteric Fever (including Paratyphoid)	...	...	...	4	3	2
Puerperal Pyrexia	...	...	...	75	69	3
Pneumonia	...	...	...	175	85	29
Erysipelas	...	...	...	62	31	5
Cerebro-Spinal Fever	...	...	...	4	4	2
Poliomyelitis	...	...	...	...	...	...
Encephalitis Lethargica	...	...	...	...	...	...
Polio-Encephalitis	...	...	...	...	...	...
Malaria	...	...	...	...	...	...
Ophthalmia Neonatorum	...	...	...	41	21	...
Measles and Rubella	...	...	...	1,213	64	3
Chicken Pox	...	...	...	490	24	...
Dysentery	...	...	...	1	1	...
Whooping Cough	...	...	...	260	21	...
Tuberculosis— (incl. obs. cases)						
Pulmonary	Males	...	...	63	68	44
	Females	...	...	45	50	33
	Total	...	...	108	118	77
Non- Pulmonary	Males	...	...	17	18	8
	Females	...	...	8	12	5
	Total	...	...	25	30	13

BACTERIOLOGICAL etc., EXAMINATIONS.

The following is a summary of examinations made during the year 1938 :-

BOROUGH LABORATORY (Isolation Hospital).

Swabs for Haemolytic Streptococci	...	...	...	132
Swabs for Diphtheria	...	...	...	7,607
Swabs for Vincent's Angina	...	...	...	53
Sputa by ordinary method	...	...	...	2,024
Sputa by concentration methods	...	...	...	326
Others	...	...	...	903

Borough Laboratory Total 11,045

COUNTY LABORATORY.

Swabs for Haemolytic Streptococci	...	...	...	232
Urine Specimens	...	...	...	8
Eye Cultures	...	...	...	9
Blood for Widal's Reaction	...	...	...	5
Others	...	...	...	44

County Laboratory Total 298

Grand Total 11,343

Summary of Cases of Infectious Disease notified in each Quarter during 1938.

Quarters.	Totals.	Small Pox.	Scarlet Fever.	Diphtheria including Membranous Croup.	Enteric Fever.	Erysipelas.	Puerperal Pyrexia.	Cerebro Spinal Fever.	Polio-myelitis.	Acute Polio-encephalitis.	Acute Encephalitis Lethargica.	Pneumonia.	Malaria.	Chicken Pox.	Dysentery.	Pulmonary Tuberculosis.	Other Tuberculous Diseases	Ophthalmia Neonatorum.	Measles and Rubella.	Whooping Cough.
First ...	1465	...	242	67	2	20	21	2	...	...	...	48	...	227	1	28	5	10	727	65
Second	959	...	179	39	2	16	21	1	...	...	...	56	...	162	...	28	6	12	377	60
Third ...	464	...	122	48	...	9	14	1	...	...	...	35	...	46	...	32	8	8	96	45
Fourth	482	...	114	101	...	17	19	...	...	...	...	36	...	55	...	20	6	11	13	90
Year ...	3370	...	657	255	4	62	75	4	...	...	...	175	...	490	1	108	25	41	1213	260
Deaths Regist'd in 1938	177	...	1	6	2	4	2	2	...	...	1	67	...	...	...	77	13	...	2	...

Particulars of Action taken with the Infectious Disease Cases.

	<i>Totals.</i>
Number of Visits made by Health Visitors	3,740
<i>Cases Isolated. Borough Hospital :—</i>	
Scarlet Fever	471
Diphtheria	226
Measles	63
Erysipelas	29
Enteric Fever	1
Whooping Cough	21
Chicken Pox	14
Mumps	1
Diphtheria Carriers	5
Observation	49
<i>Cases Removed to Borough Sanatorium :—</i>	
Pulmonary Tuberculosis	77
Non-pulmonary Tuberculosis	1
<i>Cases Isolated. City Hospital.</i>	
Pneumonia	59
Measles	1
Chicken Pox	10
Puerperal Pyrexia	33
Dysentery	1
Ophthalmia Neonatorum	9
Pulmonary Tuberculosis	33
Non-Pulmonary Tuberculosis	12
<i>Cases Isolated. Derbyshire Royal Infirmary</i>	
Pneumonia	20
Enteric Fever	2
Erysipelas	1
Puerperal Pyrexia	9
Cerebro Spinal Fever	3
Diphtheria	1
Pulmonary Tuberculosis (Derby cases)	8
Non-pulmonary Tuberculosis (Derby cases)	10
<i>Cases Isolated. Children's Hospital.</i>	
Erysipelas	1
Pneumonia	6
Cerebro Spinal Fever	1
Non-pulmonary Tuberculosis	7
<i>Cases Isolated. Women's Hospital.</i>	
Puerperal Pyrexia	18
<i>Cases Isolated. Nightingale Nursing Home.</i>	
Puerperal Pyrexia	5
Ophthalmia Neonatorum	11
<i>Cases Isolated. Queen Mary Nursing Home.</i>	
Puerperal Pyrexia	3
Ophthalmia Neonatorum	1
<i>Cases Isolated. Hartington Street Nursing Home.</i>	
Puerperal Pyrexia	1

Scarlet Fever.

Full discussion of the problems associated with this group of infections was given in the 1937 report, in which comments were made on the overcrowding at the Isolation Hospital. The long-continued epidemic reached its peak in December of that year, but continued throughout the winter and spring of 1938. Facilities for the suitable hospitalisation of cases were only possible because there was a reduction in the number of other infections requiring admission.

Conditions detailed in other years have been repeated; sore throats without rash and missed cases leading to infection of others, many consecutive cases in homes and several parents infected. Because of the mildness, and rapid subsidence of symptoms present at the onset, it is quite certain that many parents and others are not exercising strict precautionary isolation of throat illness.

Fewer cases were removed from General Hospitals than in 1937. A small house epidemic occurred at the Deaf and Dumb Institution, the 12 cases being nursed in their own premises.

The proportion of adult and adolescent workers notified was higher than ever—nearly 24% of all cases. These included cases removed from other hospitals, nurses, also parents infected by children. As is usual, adult cases followed a considerable epidemic amongst children and were most common in January and February. Of the 157 cases notified, 115 were removed to hospital, and this heavy quota of adult cases has to be borne in mind when considering the question of bed spacing, duties of nurses, and excessive work in epidemic periods.

Home Treated Cases.

Efficient nursing is not always possible, and second cases may arise. Circumspection is necessary in granting permission for scholars from infected houses to return to school at an early period, but there has been no cause for complaint, and many weeks of school time have been saved by our present methods. 5 Home 'returns' occurred after release of the primary case from isolation, all within 14 days.

"Return" Cases.

The year's total admissions of Scarlet Fever cases, which numbered 471, produced 29 "Return" cases, a percentage of 6.0, but several of these followed cases discharged about the end of 1937 when pressure on Hospital beds was excessive, and there was much overcrowding.

Otherwise the numbers were not excessive. From January to the end of March, 11 "infecting" cases produced 14 "return" cases; during the rest of the year 8 "infecting" cases produced 15 cases of infection. It has been pointed out in previous reports that the phenomenon of re-infection in the house is due to the transfer of a new "strain" acquired by mixing in a general ward. Experiences in practice, even without bacteriological control, show that this is a fact, e.g. one child from a large family caused two "returns," one of which in turn, after discharge from hospital, infected two others. Another child also caused two "returns," one of which, after discharge, infected the mother of the family. Other children infected their fathers, and one woman infected her husband. In nearly every case the infection occurred within the first or second week after discharge.

Diphtheria.

Diphtheria is not less prevalent than formerly, but it is said to be less fatal. In his Annual Report for 1937, the Chief Medical Officer of the Ministry of Health remarks "In diphtheria we appear to have reached a position of stability so far as incidence is concerned within the limits of what may be regarded as normal fluctuation, and it is doubtful if any marked diminution of incidence can be expected by procedure along the old lines of 'notification, removal and disinfection.' "

Variations in the severity of type of diphtheria have been a matter of common knowledge for many years, and the prevalence in any area of the highly toxic *gravis* strain of infection is certain to increase the fatality rate. Whereas improvement in diagnosis, the earlier removal to Hospital of infected persons, and the prevalence of less toxic strains account for the general decrease in fatality.

The prevalence of diphtheria in the County of Derbyshire which was noted in 1937 has continued ; during 1938 infections of severe type have been common in the areas contiguous to Derby, and such infections have spread into the Borough.

During the autumn some of these areas have found great difficulty in providing hospital accommodation for their cases ; we have had frequent requests for accommodation in our Isolation Hospital, but the number of beds available is barely sufficient for the needs of the town. If this increase in prevalence had occurred in the same proportions amongst Derby children, it would have been quite impossible to isolate all patients in hospital. Happily, this community is no longer unprotected.

Attention is again drawn to the need for IMMEDIATE medical advice in ailments of children, and especially when there is anything wrong with the throat, or when breathing is difficult. Diphtheria is a disease which comes on with very slight symptoms, and the patients are always more seriously ill than they seem to the inexperienced. The antitoxin treatment of Diphtheria which is of such remarkable value when applied early, is of little use when several days have been wasted in the hope that domestic remedies may cure. Parents should keep Diphtheria always in mind and send for a doctor early when a child is poorly.

This advice is just as important when Diphtheria is not very prevalent, for experience teaches that it is at such times cases of delayed attention and the almost inevitable fatalities occur.

It is now generally recognised that even under modern social conditions **the only procedure which can effectively reduce the incidence of Diphtheria is the method of specific immunisation.** Even with sanitary measures which are adopted to-day, including isolation, the spread of air-borne communicable disease is not prevented. Were conditions even better than they are, and there undoubtedly have been great improvements during recent years, Diphtheria Immunisation Schemes would still be necessary if the spread of the disease and mortality from Diphtheria is to be reduced to a minimum. Such schemes should be nation wide and available in all districts as a part of Child Welfare work, and the widest publicity given until every parent knew not only the cause but the antidote.

When one takes account of the incidence and case mortality from year to year, it is the children under 10 years of age who are the more important, and the greater the number of persons of this age who are immunised the better. As a community measure it is more valuable to protect very young children than it is to protect older ones, having regard to the fact that children, as they grow older, tend to become immune as the result of repeated sub-infections, and also in view of the high fatality rates from diphtheria among children under 5 years of age.

Where such measures have been carried out, remarkable results have followed, especially in large cities in the United States and Canada.

Wherever preventive inoculation against diphtheria is practised consistently, diphtheria deaths well nigh cease to occur, and in some communities diphtheria morbidity is also reduced to an insignificant figure.

The French Government considers this matter so important that immunisation against diphtheria is now made compulsory.

During 1938 the number of notifications increased, being 255 for the year, as compared with 196, and it must be placed on record that *the prevailing type of diphtheria is much more dangerous*. The 'gravis' type of infection is more common throughout the town, and at the end of 1938 a special letter of warning was addressed to all doctors practising within the area, pointing out the need of urgency in diagnosis and treatment. We are indeed fortunate, in that the number of deaths was only 7.

Antitoxin.

Antitoxin was supplied gratuitously, as in previous years, to the medical men practising in Derby. During 1938, the following amounts were supplied—

9 phials containing 1,000 units each.				
24	„	„	4,000	„
162	„	„	8,000	„
69	„	„	10,000	„

Diphtheria Prophylaxis.

Derby citizens are not only becoming aware of this method, but anxious to follow the advice we have given for years, and requests by post are now a daily occurrence.

In collaboration with the Child Welfare Medical Officers further opportunities have been given for Immunisation Clinics at the Centres.

The experience of past years in holding meetings for parents in Elementary Schools has shown that the uninstructed or careless fail to attend—in consequence this method has been restricted, and every parent of the children attending an Infant Department receives a personal letter prior to a Special Immunisation Campaign, and the occasion of local prevalence or some local death from diphtheria is used to time the visit.

Such special appeals have been made in eleven schools during 1938, with highly successful results.

The total of protected children in Derby has now reached FIVE THOUSAND and the proportion of the local school population so protected is now 21% at least, apart from large numbers of young children not yet in school, the naturally immune and those who have previously suffered from diphtheria.

Further, prophylaxis is available for any parent who prefers that his child should be immunised by his medical attendant and the material can be obtained by the doctor on application to the Public Health Department.

The full activities of a record year can be ascertained from the Tables.

Every case of suspected Diphtheria in an immunised child is given critical attention. It is satisfactory to note that whilst the numbers immunised increase year by year, there is no real failure, but additional proofs are furnished as to its reliability.

During 1938 eight cases of bacteriological infection occurred in immunised children, of whom two were suffering from tonsillitis, with a temporary carrier condition of diphtheria in one, and diphtheroids only in the other. One suffered from a slight rhinitis during a school outbreak, but was not ill. Of five who were notified as diphtheria, two consecutive cases were reported in two families, the first a mild clinical case infected his brother who was not ill, the second family was more interesting, in which a boy aged four had a mild tonsillitis (diphtheroids only recovered), followed in a few days by tonsillitis in the sister (Schick negative), having a small patch of membrane which resolved in 24 hours. Lastly, a boy aged six was removed to Draycott Fever Hospital from Chaddesden, during a period when 'gravis' diphtheria was prevalent at his school, who presented fairly extensive membrane on both tonsils. This child had been immunised when 20 months of age. After a large dose of antitoxin his throat was clear on the third day, recovery was uninterrupted and he was discharged from hospital in less than a month.

Diphtheria occurring more than 12 weeks after the 3rd injection of Diphtheria Prophylactic.
Sick Testing after Inoculation was not done.

Initials.	Age.	Date of Inoculation.	Interval between last dose and the illness.	CONFIRMATION OF DIAGNOSIS.		Case No.	Remarks.
				Clinical.	Bacteriological.		
R.P.	6	31/5/34— 28/6/34	4 years	Yes	Yes	Draycott	Moderately severe faucial. (Probably gravis) 50,000 units. Membrane gone 3rd day. Recovery 1 month.
A.C.	6½	27/10/36— 24/11/36*	1½ years	Yes	Yes	107	Mild faucial and nasal—only 8,000 given—serious toxæmia—recovery.
R.C. (brother) B.J.	5½ 4½	do.* 1/12/36— 29/12/36	do. 22 months	No Very slight	Yes Diphtheroid	108 219	
K.J.	6½	19/11/36— 18/12/36	23 months	slight	Yes	230	Schick Negative a month previously.

Diphtheria occurring less than 12 weeks after the 3rd injection.

F.B.	8	16/6/38— 14/7/38	4 weeks	slight nasal	Yes	137	Very mild infections.
E.B. (sister)	6	do.	3 weeks	slight faucial	Yes	140	

Doubtful Diphtheria in Inoculated Persons.

C.B.	6	8/2/34— 8/3/34	4½ years	No	Yes		Tonsillitis—Carrier only. Schick Negative 22/1/38.
I.W.	7	16/11/35— 14/12/35	3 years	Nasal Discharge.	Yes		Apyrexial.
J.B.	8	1/12/37— 19/1/38	11 months	No	No		Tonsillitis—Diphtheroids only.

* Immunised by 3 varieties of TAF. B.W. & Co. only for 3rd dose.

DIPHTHERIA PROPHYLAXIS, 1938.**Use of Schick Test.**

	No.	Non-reactors.	Reactors.	
School Teachers	—	—	—	
Scholars	233	87	146	
Re-tested after previous inoculation	309	289	20	} 4 very slight positive.

Administration of Prophylactic.

	Under 5 years.	5—15 years.	Total.
†Schick Reactors	—	140	140
Do. Teachers	—	—	—
†Inoculated without test	616*	702*	1318
†Inoculation at Isolation Hospital whilst recovering from Scarlet Fever	33	77	110
			1568

* 32 failed to complete the course.

† Including a proportion who will be completed in 1939.

B.W. & Co's T.A.F has been used throughout.

Clinics, 1938.

These were held at the Central Office, at four Maternity and Child Welfare Centres, and at various Elementary Schools, etc., by appointment.

Number of Sessions	243
First attendance of cases	1,551
Total number of attendances	4,236
Average attendance per session	17

A Table is provided giving an analysis according to age of the persons who have completed a full immunisation course since the inception of Diphtheria Prophylaxis :—

Year.	YEAR OF BIRTH.															Total.
	1938	1937	1936	1935	'34	'33	'32	'31	1930	'29	'28	'27	'26	'25	'24—'19	
1930	—	—	—	—	—	—	—	—	—	3	—	1	—	—	—	4
1931	—	—	—	—	—	—	—	10	16	14	13	19	16	16	45	149
1932	—	—	—	—	—	—	3	13	11	7	11	22	23	21	48	159
1933	—	—	—	—	—	1	20	23	28	30	54	39	35	24	52	306
1934	—	—	—	—	2	33	58	44	58	88	51	59	41	26	33	493
1935	—	—	—	2	69	78	80	101	138	151	159	111	73	46	51	1,059
1936	—	—	—	61	58	42	77	91	93	75	46	27	22	10	10	612
1937	—	1	69	69	74	65	130	112	108	52	41	17	14	5	6	763
1938	5	97	140	128	155	196	180	160	121	54	35	36	27	25	13	1,372
Totals	5	98	209	260	358	415	548	554	573	474	410	331	251	173	258	4,917

Enteric Fever.

Four cases were notified during the year, and two others kept under observation until bacteriological evidence settled the diagnosis.

The first case, a married woman of 30 years, was admitted to the Royal Infirmary in a state of collapse following intestinal haemorrhage, and succumbed. The post-mortem examination, ordered by the Coroner, revealed typhoid ulceration of the bowel and the blood showed a high agglutination titre for *B. Typhosus*. She has suffered from a vague illness, had delayed medical consultation and had not kept in bed. No history of any source of infection was obtained.

The second case, a boy of 10, was from a Derbyshire village, and sent into the Royal Infirmary with a diagnosis of Pneumonia, ? Empyema. The post-mortem examination revealed a typhoid infection.

The remaining two cases were related. A boy aged 2 years arrived in England with his parents from Madras, to stay with the grand-parents. On receipt of a Port of London notification that cases of Typhoid had been removed from the ship, the home was visited, family practitioner advised, and the child's blood showed a high agglutination to *B. Typhosus*. There were no abdominal symptoms, merely a 'cold' and some fever. This child was nursed by the mother (immunised) with little contact by the grand-mother, but the latter, nevertheless, developed a naso-pharyngeal catarrh, with some epistaxis seven days after contact with the child, in which she used her own handkerchief to wipe his nose, and dealt with urination, followed, in nine days by pyrexia—with no abdominal symptoms, yet a typhoid agglutination of 1/125. She had a sinusitis, followed by otorrhea, and staphylococci only were isolated from the nasal discharges.

Dysentery.

On February 14th, a case of "Flexner" infection was reported from the City Hospital, an ex-service man of 39 who had suffered from Dysentery in Egypt in 1919. He had been admitted for a mild colitis, which rapidly subsided, but was kept isolated until bacteriologically negative. Investigation of the home and family followed. On January 28th, his youngest boy, aged 2 years, had been admitted to hospital as a query appendicitis, and died in 12 hours. A death certificate, after post-mortem, had been given "acute colitis, toxæmia." On January 31st, a boy of 5 years had acute diarrhoea and was sent into hospital; the girl of 8 years had a slight diarrhoea (she had previously suffered from infective jaundice) but rapidly recovered. The father became ill the same day as the boy.

It was reported that a child next door, since removed and not traced, had diarrhoea about the same time, but no medical attention. No other neighbour had been ill. A row of four trough closets served these houses, and there was some possibility of contamination. The Sanitary arrangements were referred to the Chief Sanitary Inspector.

Abortus Fever.

Private information was received of one case, that of a young man who drank large quantities of milk both at home and at work.

Diagnosis was made from the agglutination tests, and recovery was uneventful. Knowledge of this infection came too late for any enquiries as to milk supplies.

Acute Anterior Poliomyelitis.

One case was notified and later withdrawn—the cause of death being streptococcal meningitis.

Cerebro Spinal Meningitis.

Two cases were notified from local hospitals, both of which died. No evidence of any source of infection could be obtained.

Measles.

The epidemiology of this disease has been fully dealt with in previous reports.

The continuation of epidemic conditions from areas of school infection is certain at the Christmas season, by means of visits to shops and bazaars, Sunday school and works parties, and the pantomime.

Family visits aid in transfer of infection to new districts, and regular attendants at cinema matinees both carry and catch infection, in spite of all warnings.

New schools were infected at the outset of the year, and the epidemic lasted until June. Amongst younger children, there were many cases who might have been infected at Child Welfare Centres, or when attending the Ultra-Violet Light Clinic.

There were 3 deaths—one a stranger admitted to a Nursing Home from a Public School where the disease was prevalent, who died following mastoidectomy.

No convalescent serum has been used in Derby. Immune globulin has been used frequently at the Children's Hospital in attempts to stop the spread of measles in infected wards, and with some but not complete success.

Whooping Cough.

This distressing infection was less prevalent. Approximately 260 cases came under observation of the Health Visitors and School Nurses, and there were *no* deaths. As far as our supply of cubicle beds would allow, serious cases were removed to the Isolation Hospital, 21 children being so isolated. The disease became more widespread in the Autumn term, suggesting a heavier infection of the town would follow in 1939.

Vaccines continue to be employed at the special Whooping Cough Clinic held at the Children's Hospital, both for treatment and for prophylaxis; and are now employed with satisfactory results in the treatment of cases in the Borough Isolation Hospital.

Epidemic Jaundice.

Reference to this infection was made in the 1937 Report, where the possibility of endemicity was raised. Following an increasing number of cases at the end of 1937, thrce areas of the town were moderately infected in January, with subsequent spread of infection from each area to other scholars and schools. The School Medical Officers saw many cases, and exercised their powers of exclusion from school. Reported cases diminished in July, with, again, a slight increase in the Autumn. The total of known cases approximated 130, of which number less than 30 occurred after the summer holidays ; there was no indication of any prevalence at the end of the year.

Cases varied considerably, many being moderately severe and causing a good deal of debility and loss of school time. Pressure of other duties prevented personal investigation as to family history and spread, but where information was obtained second cases, if any, occurred at approximately fourteen to sixteen days interval from the primary.

OPHTHALMIA NEONATORUM.

Cases notified 41

25 of the cases were males and 16 females.

<i>Cases.</i>			<i>Vision unim- paired.</i>	<i>Vision im- paired.</i>	<i>Total Blind- ness.</i>	<i>Deaths.</i>
<i>Notified.</i>	<i>Treated.</i>					
	<i>At Home.</i>	<i>In Boro' Hospitals.</i>				
41	*32	†9	‡41	—	—	2

* Included in this number are 4 cases treated at the Derbyshire Royal Infirmary and 3 at the Children's Hospital as Out-patients.

† In-patients of City Hospital (9).

The causes of death of the two notified cases were certified as Catarrhal Jaundice, prematurity (died at one month old) and Prematurity (died at six weeks old).

‡ Eight cases left Derby before the end of the year.

The number of cases notified was 2 more than in 1937.

Disinfection and Disinfestation.

The following summary shows particulars of disinfections and disinfestations carried out during the year :—

AFTER INFECTIOUS DISEASES.

Rooms Disinfected	...	...	...	...	...	...	880
Clothing (Midwives), etc. (instances)	...	...	...	...	...	...	71

OTHERS (including Cancer, Verminous conditions, etc.,
Disinfection only carried out by request).

Rooms Disinfected	...	...	...	...	...	...	12
Bedding, Clothing, etc. (instances)	...	...	...	...	...	...	10

CANCER.

The recorded deaths from various types of malignant disease show a decrease in number as compared with 1937, viz. :—201 (203).

The table shows the deaths by age distribution :—

<i>Age</i>	<i>25-44 years.</i>		<i>45-64 years.</i>		<i>65-74 years.</i>		<i>75 years & upwards.</i>		<i>All Ages.</i>		
<i>Sex</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>Both Sexes.</i>
Deaths from Cancer ...	*5	11	40	47	40	26	13	19	98	103	201

* Includes 1 male aged 21.

VENEREAL DISEASES.

FORM V.D. (R). (Revised).

RETURN relating to all persons who were treated at the Treatment Centre at Royal Infirmary, Derby, during the year ended 31st December, 1938.

	Syphilis		Soft Chancres		Gonorrhoea		Conditions other than Venereal.		TOTAL.		TOTALS.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
1 Number of cases on 1st January under treatment or observation ...	192	153	—	1	174	74	42	25	408	253	661
2 Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection ...	5	5	—	—	2	2	—	—	7	7	14
3 Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from:—											
Syphilis, primary ...	4	2	—	—	—	—	—	—	4	2	6
„ secondary ...	18	10	—	—	—	—	—	—	18	10	28
„ latent in 1st year of infection* ...	—	2	—	—	—	—	—	—	—	2	2
„ all later stages ...	20	17	—	—	—	—	—	—	20	17	37
„ congenital ...	5	9	—	—	—	—	—	—	5	9	14
Soft Chancres ...	—	—	5	—	—	—	—	—	5	—	5
Gonorrhoea—											
1st year of infection ...	—	—	—	—	217	51	—	—	217	51	268
later... ...	—	—	—	—	1	—	—	—	1	—	1
Conditions other than venereal... ..	—	—	—	—	—	—	171	58	171	58	229
4 Number of cases dealt with for the first time during the year under report known to have received treatment for the same infection, or to have been under observation, at other Centres	8	3	1	—	19	1	—	—	28	4	32
TOTALS OF ITEMS 1, 2, 3 AND 4...	252	201	6	1	413	128	213	83	884	413	1297
5 Number of cases discharged after completion of treatment and final tests of cure or after diagnosis as non-venereal ...	29	10	5	—	149	21	173	62	356	93	449
6 Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from:—											
Syphilis, primary... ..	3	—	—	—	—	—	—	—	3	—	3
„ secondary ...	3	5	—	—	—	—	—	—	3	5	8
„ latent in 1st year of infection* ...	1	—	—	—	—	—	—	—	1	—	1
„ all later stages ...	4	4	—	—	—	—	—	—	4	4	8
„ congenital ...	4	6	—	—	—	—	—	—	4	6	10
Soft Chancres ...	—	—	—	1	—	—	—	—	—	1	1
Gonorrhoea—											
1st year of infection ...	—	—	—	—	50	19	—	—	50	19	69
later ...	—	—	—	—	1	—	—	—	1	—	1
7 Number of cases which ceased to attend after completion of treatment, but before final tests of cure ...	4	1	—	—	7	3	—	—	11	4	15
8 Number of cases transferred to other centres or to institutions, or to care of private practitioners...	13	6	—	—	39	4	—	—	52	10	62
9 Number of cases remaining under treatment or observation on 31st December ...	191	169	1	—	167	81	40	21	399	271	670
TOTALS OF ITEMS 5, 6, 7, 8 AND 9 (These totals should agree with those of Items 1, 2, 3 and 4)	252	201	6	1	413	128	213	83	884	413	1297

	Syphilis.		Soft Chancere.		Gonorrhoea		Conditions other than Venereal.		TOTAL.		TOTALS.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
10 Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment :—											
Syphilis, primary	2	—	—	—	—	—	—	—	2	—	2
,, secondary	2	3	—	—	—	—	—	—	2	3	5
,, latent in 1st year of infection*	—	—	—	—	—	—	—	—	—	—	—
,, all later stages	4	2	—	—	—	—	—	—	4	2	6
,, congenital	2	3	—	—	—	—	—	—	2	3	5
11 Number of attendances :—											
(a) for individual attention of the Medical Officers	3030	2188	23	4	4392	775	806	115	8251	3082	11333
(b) for intermediate treatment, e g., irrigation, dressing	274	—	45	—	10059	2370	559	—	10937	2370	13307
TOTAL ATTENDANCES	3304	2188	68	4	14451	3145	1365	115	19188	5452	24640
12 In-patients :—											
(a) Total number of persons admitted for treatment during the year	5	—	—	—	14	8	2	2	21	10	31
(b) Aggregate number of "in-patient days" of treatment given	24	—	—	—	216	153	23	18	263	171	434
	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals.		
13 Number of cases of congenital syphilis in Item 3 above classified according to age periods	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
	1	—	—	—	1	4	3	5	5	9	
	Arsenical.										
	Approved Arsenobenzene Compounds				Others.		Mercury		Bismuth		
14 (a) Names of chief preparations used in the treatment of Syphilis :—	Novarsenobillon Sulfarsenäl				Mapharside Acetylarsan Trypar-samide Orarsan		Hg. c̄ cret. pills grs. i & tabs. grs. i & grs. ¼		Neo-Cardyl		
(b) Total number of injections given (out-patients and in-patients)	1110				1452		—		2244		

FORM V.D. (R).—continued.

	Microscopical		Cultural for Gonor- rhœa	Serum		Cere- bro- spinal fluid	Others for diagnosis of Venereal Disease
	for Syphi- lis	for Gonor- rhœa		for Syphi- lis	for Gonor- rhœa		
15 Pathological Work :—							
(a) Number of specimens ex- amined at, and by the medical officer of, the treatment centre ...	51	1896	—	—	—	—	—
(b) Number of specimens from patients attending at the treatment centre sent for examination to an approved laboratory ...	—	—	—	963	21	3	—

**Statement showing the services rendered at the Treatment Centre during the
year, classified according to the areas in which the patients resided.**

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings.	Derby Borough.	Derby County.	Staffs. County	Leicester County.	Notts. County.	TOTAL.
A. Number of cases from each area included under the following headings in Item 3 :—						
Syphilis	51	35	1	—	—	87
Soft Chancre	3	2	—	—	—	5
Gonorrhœa	155	113	—	1	—	269
Conditions other than venereal	146	79	1	2	1	229
TOTAL	355	229	2	3	1	590
B. Total number of attendances of all patients residing in each area	15563	8864	110	69	34	24640
C. Aggregate number of "In-patient days" of all patients residing in each area	221	213	—	—	—	434

*"Syphilis latent in first year of infection," applies to cases presenting no clinical sign of syphilis but discovered (by blood test, etc.) to have contracted this disease within the preceding 12 months.

30th January, 1939.

(Signed) H. R. MORGAN RICHARDS,
M.O. i/c V.D. Clinic.



v.--TUBERCULOSIS.

REPORT BY

DR. W. H. WRAY, Tuberculosis Medical Officer.

There have not been any outstanding changes in the work of the Tuberculosis Clinic during the year under review.

The notifications of pulmonary tuberculosis shew an increase of eighteen and the notifications of non-pulmonary tuberculosis a decrease of one.

The deaths shew an increase of two, in both cases due to non-pulmonary tuberculosis. Five of the deaths were due to tuberculous meningitis, a decrease of two on the previous year.

Notifications.

				<i>Comparison with</i>	
				1938.	1937.
Pulmonary Tuberculosis	...	...	...	108	90
Non-pulmonary Tuberculosis	...	...	...	25	26
Total				133	116

The Non-pulmonary cases notified in 1938 consisted of:—

Abdominal Tuberculosis	...	8	Tuberculosis of Skin	...	2
Tuberculous Meningitis	...	4	Miliary Tuberculosis	...	1
„ Spine	...	4	Tuberculous Knee-joint	...	1
„ Hip Joint	...	2	Tuberculosis of Fissure in Ano...	...	1
„ Cervical Glands	...	2			

Deaths.

					<i>Comparison with</i>	
					1938.	1937.
Pulmonary	...	...	...	...	77	77
Non-pulmonary	...	...	...	...	13	11
Total					90	88

The thirteen deaths from Non-pulmonary Tuberculosis in 1938 were certified as being due to:—

Tuberculous Meningitis	...	...	5 instances.
Abdominal Tuberculosis	...	...	3 „
Miliary Tuberculosis	...	...	2 „
Tuberculous Spine	...	...	1 instance.
„ Kidney	...	...	1 „
„ Cervical Glands	...	...	1 „

Of the deaths from pulmonary tuberculosis, 6.5% occurred previous to notification. 69.2% of the deaths of the non-pulmonary tuberculosis cases (9 of the total 13) occurred previous to notification. 64.9% of the deaths from pulmonary tuberculosis occurred within two years of notification (including those not notified previous to death).

Contacts.—There is a slight decrease in the number examined compared with last year.

X-Ray Work.—This continued to be very heavy, the number of screenings being 797. The number of films taken was 511.

Family History.—This important aspect of case recording has again been followed up. It was found that 38 of the 108 notifications of pulmonary tuberculosis (35.2%) and 7 of the 25 non-pulmonary tuberculosis cases (28.0%) came from tuberculous families. In addition, 12 others gave a history of other respiratory diseases in members of the family.

Dental.—One clinic per month was held for cases referred by the Tuberculosis Medical Officer. In most cases advice only was given, there being one to whom dentures were supplied. (See page 30 for table of figures).

Nurses' Visits.—The number of visits paid to the houses of the patients by the Nurses was 2,476 (excluding unsuccessful visits).

Housing Conditions.—In eleven of the 133 cases notified in 1938 there were two or more families to a house. This percentage is 8.2 of the whole, and it is interesting to compare it with the percentage for the year 1924, which was 19.8.

The percentage of patients who had a separate bedroom was 45.6; this compares with the percentage of 35.0 in 1924.

Tuberculosis Clinic.

Number of Clinics held	...	...	...	252
Total number of Attendances	...	...	...	3,521
Number of new Patients examined	...	...	...	403
Number of Contacts examined	...	...	...	216

Seven of the contacts were found to be suffering from active Tuberculosis.

Open-air shelters were loaned to 16 patients during the year.

Ancillary treatment, in the form of a daily supply of milk, was granted to 30 patients during the year.

Disinfections, etc.—During the year 1938, 133 houses were disinfected after death or removal of Tuberculous patients. 1034 bottles of disinfectant fluid and 1,148 supplies of paper handkerchiefs were given out from the Tuberculosis Clinic.

School Children.—The number of school children examined (231) includes observation cases and contacts.

Number of school children notified in 1938	...	...	...	5
Pulmonary Tuberculosis	...	...	...	4
Other forms of Tuberculosis	...	...	...	1

The Non-Pulmonary case notified was one of tuberculosis of the right hip.

The number of school children admitted to the Borough Sanatorium was five, and the number discharged was fourteen, their average stay in the Institution being 447.5 days. There were no deaths of school children in the Sanatorium during the year.

Thirty-three school children were excluded from school for varying periods.

Borough Sanatorium.

Number of patients	admitted	...	...	78
„	discharged	...	...	75
„	died	...	...	19

The average stay of the patients discharged was 215·6 days, and for the patients who died 186·9 days.

Considerable difficulty was experienced in getting male patients admitted to the Sanatorium during the winter months owing to the shelter beds not being available. This, coupled with the reluctance of the other Institution (City Hospital), to admit cases of tuberculosis, made pressure on the ordinary male beds in the Sanatorium very severe, and accounts for the decreased number admitted. It led to a mixing of cases in various stages of the disease, which is always undesirable.

Part III.

NOTIFICATION REGISTER.

	Pulmonary.			Non-Pulmonary			Total Cases.
	Males	Females	Total	Males	Females	Total	
Number of cases of Tuberculosis remaining at the 31st December, 1938, on the Register of notifications kept by the Medical Officer of Health of the County Borough	237	157	394	45	26	71	465
Number of cases <i>removed</i> from the Register during the year by reason <i>inter alia</i> of:—							
1. Withdrawal of notification	—	—	—	—	—	—	—
2. Recovery from the disease...	11	20	31	9	5	14	45
3. Death (all causes) ...	49	33	82	9	5	14	96
4. Otherwise ...	19	11	30	3	6	9	39

TUBERCULOSIS SCHEME OF THE DERBY COUNTY BOROUGH COUNCIL.

TABLE 1.—Return showing the work of the Dispensary during the year 1938.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				GR'ND TOTAL
	Adults.		Children		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—NEW CASES examined during the year (excluding contacts):—													
(a) Definitely tuberculous ...	39	25	—	4	10	5	1	1	49	30	1	5	85
*(b) Diagnosis not completed	—	—	—	—	—	—	—	—	6	3	3	2	14
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	94	53	40	54	241
B.—CONTACTS examined during the year :—													
(a) Definitely tuberculous ...	3	3	—	—	—	—	1	—	3	3	1	—	7
*(b) Diagnosis not completed	—	—	—	—	—	—	—	—	1	2	1	1	5
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	38	59	52	55	204
C.—CASES written off the Dispen- sary Register as													
(a) Recovered ...	8	14	2	5	1	—	1	2	9	14	3	7	33
(b) Non-tuberculous (includ- ing any such cases previous- ly diagnosed and entered on the Dispensary Register as Tuberculous) ...	—	—	—	—	—	—	—	—	132	115	93	116	456
D.—NUMBER OF PERSONS on Dis- pensary Register on Decem- ber 31st :—													
(a) Diagnosis completed ...	193	116	23	19	21	11	23	10	214	127	46	29	416
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	7	5	4	3	19

* i.e., remaining undiagnosed on 31st December.

1. Number of persons on Dispensary Register on January 1st... .. 450	2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years 30
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" ... 37	4. Cases written off during the year as Dead (all causes) 75
5. Number of attendances at the Dispensary (including Contacts) ... 3521	6. Number of Insured Persons under Domiciliary Treatment on the 31st December 151
7. Number of consultations with medical practitioners :— (a) Personal 61 (b) Otherwise 547	8. Number of visits by Tuberculosis Officers to homes (including personal consultations) 109
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes 2476	10. Number of (a) Specimens of sputum, &c., examined 969 (b) X-ray examinations made in connection with Dispensary work (Sputum, etc., examined for other purposes) 857
11. Number of "Recovered" cases restored to Dispensary Register and included in A (a) and A (b) above 4	12. Number of "T.B. plus" cases on Dispensary Register on December 31st 263

Section B.

Number of Dispensaries for the treatment of Tuberculosis (excluding centres used only for special forms of treatment):—

Provided by the Council	...	...	One.
Provided by Voluntary Bodies	...	...	Nil.

Section C.

Number of beds available for the treatment of Tuberculosis on the 31st December in Institutions belonging to the Council:—

Name of Institution	For Pulmonary Cases		For Non-Pulmonary Cases		Total.
	Adults	Children under 15	Adults	Children under 15	
Derby Borough Tuberculosis Sanatorium	43	Nil.	Nil specified. 4 cases can be admitted	Nil.	43*
City Hospital, Derby	Nil.	Nil.	7	3	10

*—In addition, shelter accommodation was being used on Dec 31st, for six adults.

Section D.

Return showing the Extent of Residential Treatment and observation during the year in Institutions (other than Poor Law Institutions) approved for the Treatment of Tuberculosis :—

		In Instit't'ns on Jan. 1	Admitted during the year.	Discharged during the year.	Died in the Instit't'ns	In Instit't'ns on Dec. 31
Number of doubtfully tuberculous cases admit- ted for ob- observation.	Adult Males ...	—	10	8	1	1
	Adult Females	4	1	5	—	—
	Children ...	10	9	17	—	2
	Total ...	14	20	30	1	3
Number of patients suffering from Pulmonary Tuberculosis.	Adult Males ...	26	50	42	14	20
	Adult Females	12	44	32	10	14
	Children ...	2	6	7	—	1
	Total ...	40	100	81	24	35
Number of patients suffering from Non- Pulmonary Tuberculosis.	Adult Males ...	5	7	6	1	5
	Adult Females	2	5	1	2	4
	Children ...	8	3	3	1	7
	Total ...	15	15	10	4	16
GRAND TOTAL ...		69	135	121	29	54

Section E.

Return showing the Extent of Residential Treatment provided during the year in Poor Law Institutions for persons chargeable to the Council :—

Nil.

Section F.

Return showing the Results of Observation of Doubtfully Tuberculous cases discharged during the year from Institutions approved for the treatment of Tuberculosis :—

Diagnosis on discharge from observation.	For Pulmonary Tuberculosis						For Non-Pulmonary Tuberculosis						Totals.		
	Stay under 4 weeks			Stay over 4 weeks			Stay under 4 weeks			Stay over 4 weeks					
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Tuberculous ...	1	—	—	2	2	2	1	—	—	—	—	1	4	2	3
Non-Tuberculous	2	—	1	—	3	13	—	—	—	—	—	—	2	3	14
Doubtful ...	—	—	—	2	—	—	—	—	—	—	—	—	2	—	—
Totals ...	3	—	1	4	5	15	1	—	—	—	—	1	8	5	17
Died ...	—	—	—	1*	—	—	—	—	—	—	—	—	1	—	—

*Death certified as :—“Gangrene of right lung following Broncho-pneumonia, Bronchiectasis, P.M.”

Section G.—Return showing the immediate results of treatment of Definitely Tuberculous patients during the year from Institutions approved for the treatment of Tuberculosis:—

Classification on admission to the Institution.		Condition at time of discharge.	Duration of Residential Treatment in the Institution.												Totals.			Grand Totals.		
			Under 3 m'ths but exceeding 28 days.			3—6 months.			6—12 months.			More than 12 months.								
			M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.						
Class T.B. minus.	...	...	...	2	2	2	1	2	1	—	—	—	—	—	—	—	3	4	4	11
Class T.B.plus. Group 1.	...	...	...	—	2	1	—	—	—	—	—	—	—	—	—	—	3	2	2	7
Class T.B.plus. Group 2.	...	...	...	—	4	—	—	—	6	—	—	—	—	—	—	—	1	16	—	35
Class T.B.plus. Group 3.	...	...	...	—	—	2	3	—	—	—	—	—	—	—	—	—	—	2	6	15
Bones & Joints.	...	...	...	—	—	—	1	1	—	—	—	—	—	—	—	—	—	1	—	83
Abdominal.	...	...	...	1	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	2
Other Organs.	...	...	...	1	—	—	1	—	—	—	—	—	—	—	—	—	1	1	1	1
Peri-pheral Glands.	...	...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Totals (non-Pulmonary)	2	1	1	2	1	—	1	—	—	—	—	—	—	—	—	—	6	2	2	10

PULMONARY TUBERCULOSIS.

Supplementary Annual Return showing in summary form (*a*) the condition at the end of 1938 of all patients remaining on the Dispensary Register; and (*b*) the reasons for the removal of all cases written off the Register. The Table is arranged according to the years in which the patients were first entered on the Dispensary Register as definite cases of pulmonary tuberculosis, and their classification at that time.

Condition at the time of the last record made during the year to which the return relates.	Previous to 1928				1928.				1929.				1930.				1931.				1932.					
	Class T.B. plus.				Class T.B. +				Class T.B. +				Class T.B. +				Class T.B. +				Class T.B. +					
	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T.B. +)	Group 1.	Group 2.	Group 3.	Total (Class T.B. +)	Group 1.	Group 2.	Group 3.	Total (Class T.B. +)	Group 1.	Group 2.	Group 3.	Total (Class T.B. +)	Group 1.	Group 2.	Group 3.	Total (Class T.B. +)		
(a) Remaining on Dispensary Register on 31st Dec.	Class T.B. minus.				Class T.B. minus.				Class T.B. minus.				Class T.B. minus.				Class T.B. minus.				Class T.B. minus.				Class T.B. minus.	
	—	2	—	4	—	1	—	2	—	—	—	1	—	3	1	—	2	—	1	3	—	1	—	3	—	
	1	1	—	2	—	—	—	—	—	—	—	—	—	2	—	—	—	—	2	—	2	—	—	—	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	4	—	—	—	—	1	—	1	—	—	—	—	
Adults M F. Children	—	2	—	2	—	1	—	2	—	—	—	1	—	3	1	—	2	—	1	3	—	1	—	3	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	1	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Disease M. F. Children	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	1	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Condition not ascertained during the year ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total on Dispensary Register at 31st December	1	5	—	11	2	2	—	4	1	1	2	—	3	10	3	5	—	8	4	12	—	1	22	6	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Discharged as Adults M. F. Children	292	33	1	195	3	4	—	7	7	1	1	—	2	12	—	—	—	—	3	3	—	1	2	—	2	
	255	19	—	87	2	1	1	4	11	1	3	—	4	9	1	—	—	—	1	1	—	2	9	—	9	
	514	64	5	69	21	2	—	2	13	—	—	—	—	29	—	—	—	—	—	—	1	3	1	—	4	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Lost sight of, or otherwise removed from Dispensary Register ...	506	64	22	232	17	1	7	1	9	22	4	3	1	8	18	1	20	5	3	8	—	1	1	1	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Adults M. F. Children	235	49	148	233	6	4	16	11	31	2	11	18	13	42	1	7	24	9	40	—	7	24	6	37	1	
	168	23	58	121	4	5	10	8	23	1	6	16	4	26	—	3	9	5	17	—	6	9	2	17	2	
	41	13	7	10	30	—	1	—	—	1	—	1	1	2	—	—	—	—	—	—	—	—	—	—	—	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total written off Dispensary Register ...	2011	524	334	387	1245	77	18	38	21	77	56	23	42	19	84	69	19	44	15	78	8	20	42	8	70	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Grand Totals ...	2012	530	339	387	1256	77	20	40	21	81	57	24	44	19	87	79	22	49	15	86	12	24	54	8	86	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

NON-PULMONARY TUBERCULOSIS.

Supplementary Annual Return showing in summary form (a) the condition at the end of 1938 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register:—

		Previous to 1928.				1928.				1929.				1930.				1931.				1932.				
		Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.
Condition at the time of the last record made during the year to which the return relates.	Adults M.	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	" F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Children	-	-	-	-	-	-	-	-	-	1	-	-	-	-	3	-	-	-	-	-	-	-	-	-	-
	Adults M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	" F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
(a) Remaining on Dispensary Register on 31st Dec.	Children	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Condition not ascertained during the year ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Total on Dispensary Register at 31st December	1	-	1	-	2	-	-	-	-	-	1	-	-	-	1	3	-	-	-	-	3	4	-	1	5
	Transferred to Pulmonary ...	10	10	3	14	27	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Discharged as Recovered	6	1	2	9	18	2	-	1	-	3	-	-	-	-	-	4	-	-	-	-	-	-	-	1	2
(b) Not now on Dispensary Register and reasons for removal therefrom.	" Children	4	2	2	13	21	-	1	-	2	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-
	Lost sight of, or otherwise removed from Dispensary Register ...	27	45	18	132	222	4	2	2	10	18	2	1	-	2	5	-	-	-	-	-	-	2	-	2	4
	Dead	35	19	13	49	116	2	1	1	-	4	1	-	-	1	2	4	-	-	-	-	3	-	1	-	2
	Adults M.	4	2	1	2	9	1	1	-	-	2	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-
	" F.	4	2	4	3	13	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-
Grand Totals of (a) and (b) (excluding those transferred to Pulmonary) ...	Children	4	14	8	5	31	1	-	1	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Total written off Dispensary Register ...	84	85	48	213	430	10	5	5	11	31	4	1	-	3	8	10	3	1	9	23	3	3	1	2	9
	Transferred to Pulmonary ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Discharged as Recovered	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Dead	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

		1933.			1934.			1935.			1936.			1937.			1938.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
(a) Remaining on Dispensary Register on 31st Dec.	Adults M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
	" F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
	Children	1	-	2	-	3	2	1	-	3	6	3	3	-	1	7	-	1	3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

No action was taken during 1938 under the above Regulations relating to Tuberculous Employees in the Milk Trade.

PUBLIC HEALTH ACT, 1936, SECTION 172.

No action was taken during 1938 under this Section of the Act, (relating to the compulsory removal to hospital of persons suffering from tuberculosis).

SUMMARY.

NOTIFICATIONS.

Pulmonary Tuberculosis—
Males 63, Females 45,
Total 108.

Non-Pulmonary Tuberculosis—
Males 17, Females 8,
Total 25.

DEATHS.

Pulmonary Tuberculosis 77. Non-Pulmonary Tuberculosis 13.

AGE AND SEX INCIDENCE

Age Periods.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1 ..	—	—	—	—	—	—	—	—
1—5 ..	2	—	3	1	1	—	2	1
5—15 ..	1	5	1	—	—	1	—	—
15—25 ..	13	15	6	1	4	9	2	1
25—35 ..	16	10	1	—	9	6	—	—
35—45 ..	10	10	4	1	13	6	2	—
45—55 ..	11	3	—	3	10	4	—	2
55—65 ..	7	1	—	1	4	5	—	1
65 and upwards ..	3	1	2	1	3	2	2	—
Totals ..	63	45	17	8	44	33	8	5

Charity Organisation Society.

The help and advice given by the Charity Organisation Society to several tuberculous patients is noted with appreciation.

vi.--HOSPITALS.

INCLUDING REPORTS BY

DR. TAYLOR, Resident Medical Superintendent,
Isolation Hospital and Sanatorium,

AND

DR. COOKE, Resident Medical Superintendent, City Hospital.

BOROUGH ISOLATION HOSPITAL.**GENERAL STATISTICS.**

	<i>Scarlet Fever.</i>	<i>Diph- theria.</i>	<i>Measles & German Measles.</i>	<i>Whooping Cough.</i>	<i>Other Diseases.</i>	<i>Totals.</i>
Remaining under treat- ment, Dec. 31st, 1937	78	22	10	—	5	115
Admitted during 1938 ...	471	224	63	21	99	880
Discharged during 1938 ...	509	192	71	13	93	878
Died during 1938 ...	1	5	1	—	4	13
Remaining under treat- ment on Dec. 31st, 1938...	39	49	1	8	7	104

OTHER CASES.

	<i>Remaining in Hosp. 31/12/37</i>	<i>Admitted.</i>	<i>Discharged.</i>	<i>Died.</i>	<i>Remain- ing 31/12/38</i>
Erysipelas... ..	1	29	25	4	1
Chicken Pox	1	14	15	—	—
Enteric Fever	—	1	1	—	—
Mixed Tumour of Parotid Gland	—	1	—	1	—
Observation Scarlet Fever	2	17	17	—	2
Observation Diphtheria...	1	23	24	—	2
Observation Enteric Fever	—	1	1	—	—
Observation Measles ...	—	2	2	—	—
Observation Erysipelas ...	—	1	—	—	1
Observation Dysentery ...	—	1	1	—	—
Observation Cerebro ...	—	—	—	—	—
Spinal Meningitis ...	—	1	1	—	—
Vincent's Angina ...	—	1	1	—	—
Diphtheria Carrier ...	—	5	5	—	—
Mumps	—	1	—	—	1
T.B. Meningitis & Spine	—	1	—	1	—
	<hr/> 5 <hr/>	<hr/> 99 <hr/>	<hr/> 93 <hr/>	<hr/> 4 <hr/>	<hr/> 7 <hr/>

SCARLET FEVER.

Number of cases	... 471
Number of deaths	... 1

The fatal case was complicated by Septicaemia following a fractured femur caused by a motor accident.

Scarlet Fever Antitoxin is administered in the majority of cases and definitely cuts down the acute stage, as well as complications, apart from those affecting the ear. Ear complications are common and troublesome.

OPERATIONS.

Mastoidectomy	8
Paracentesis Tympani ...	6
Appendicectomy	2

The average stay in hospital of a straightforward case is 28 days.

DIPHTHERIA.

Number of cases	...	224
Number of deaths	...	5
Case mortality	...	2.2%

OPERATIONS.

Tracheotomy	...	...	2
Tonsillectomy in carriers (3 of whom were members of the staff)	...	...	4

For the past few years, the death rate in Diphtheria has been a low one, the great majority of deaths being solely due to delay in starting treatment. Unfortunately, from the end of the year onwards, Derby has become invaded by the Gravis type. This type causes a very high mortality, and brooks no delay whatever in treatment. Within a few hours, a child may pass from the stage of playing outdoors to that of a critically ill condition.

Some points to note are :—

1. The rapid, often fulminating progress of the Gravis type of Diphtheria.
2. The enormous and expensive amount of Antitoxin required in treatment. Many of such cases require about 200,000 units—of which 50,000—100,000 is required intravenously.
3. The long stay, 3—4 months, required in Hospital, with, consequently, a serious blocking up of beds.

OTHER DISEASES.

It was noted during 1938, that Whooping Cough responded well to treatment by Vaccine, that Measles was more benign than usual, while Erysipelas was more severe, causing nasty eye complications.

STAFF.

Two nurses developed Diphtheria. One had been immunised, became susceptible again, and was undergoing a second course—the other was a new-comer just commencing her immunisation course. In both cases, they were nursing in a ward free from Diphtheria, but the discovery of a Gravis carrier in a Scarlet Fever patient coincided with their illness.

The health of the Staff generally was quite satisfactory.

NURSING STAFF.

	<i>Examination Results.</i>	
	<i>Passed.</i>	<i>Failed.</i>
Educational Test	8	2
Preliminary Examination	3	0
Final Examination	7	1

New 'Nurses' Charter.' The Committee made a strong effort to improve nurses' conditions, involving increased salary scale, 48-hours week, removal of many restrictions, and a fuller dietary. The old 'stiff collar and apron' uniform was replaced by a lighter, comfortable dress, which is supplemented by overalls, while nursing. Those changes have been highly appreciated by the staff.

GENERAL.

70 visits were paid by the Consultant Staff during the year and, altogether, 20 major operations were performed. The promptness and courtesy with which the Consultant Staff respond to calls for their services is much appreciated.

Great difficulty was experienced during the first quarter of the year in taking in all the cases seeking admission and 33 Borough cases, including 7 from other hospitals, could not be accepted when admission was asked for.

In November, Sanatorium Ward 3 (24 beds) was taken over for Infectious Diseases and has been in constant use in this respect, since. Although this has been a great help, it is not a satisfactory principle to have such a ward in the midst of a Sanatorium. In any case, it is expected, before long, that this ward will have to revert to Sanatorium work. The problem of an 81-bed Fever Hospital being constantly asked to accommodate 100—130 patients is becoming a serious one. Overcrowding is against the welfare of patients and nurses, the risk of cross-infection and complications is greatly increased, it increases the work of the nursing staff and tends to make them lose interest in their work. It tends to hasten the discharge of patients before they are thoroughly fit. There are numerous other disadvantages of such a system and the position will have to be defined, that either this element of overcrowding be greatly curtailed, or steps are promptly taken to increase the number of beds.

DENTAL.

One clinic each fortnight was held, special arrangements being made for the treatment of any unusually urgent cases. The patients treated were largely from the Sanatorium, and the treatment consisted of Fillings, Extractions, etc., there being no call for the construction of dentures. (See page 30 for table of figures).

SANATORIUM.

77 patients were admitted during 1938. Statistics will be found in the Tuberculosis Officer's report.

The Sanatorium is at present reduced to two wards, one female and one male. A new ward has been approved and the commencement of work on it is anxiously awaited, for while no trouble is found in admitting female cases, there is constant pressure on the male beds, and the kitchen and duty room on the male ward are really inadequate efficiently to serve the numbers admitted.

LABORATORY.

Swab examinations	...	...	...	...	...	4,501
Biochemical examination of Positive cultures :—						
Gravis type	...	...	...	...	...	27
Mitis and Intermediate	...	...	...	...	...	97
Diphtheroids	...	...	...	...	...	106

Sputum Examinations.

By direct method	...	...	...	...	...	517
By concentration method	...	...	...	...	...	22
By culture method	...	...	...	...	...	6
Urines for T.B.	...	...	...	...	...	9

Miscellaneous.

Examination for Vintent's Angina	10
Examination for Haemolytic Streptococci	132
Examination of Cerebro-Spinal Fluids, Faeces, etc.	23
Biochemical examination of Urines	586

Isolation Hospital Provisioning, 1938.

1938.	Days in Hospital (Patients).	Average Patients per day.	Cost of Provisioning.	Average Cost per Patient per day.*
			£ s. d.	s. d.
1st Quarter	10,674	118.60	834 9 0	1 6.76
2nd „	7,386	81.16	658 15 11	1 9.41
3rd „	6,046	65.72	639 4 0	2 1.37
4th „	7,913	86.01	731 8 1	1 10.18
Totals 1938	32,019	87.72	2,863 17 0	1 9.47
Totals for 1937	31,945	87.52	2,795 1 4	1 9.00

* This includes cost of provisioning staff.

Tuberculosis Sanatorium Provisioning, 1938.

1938.	Days in Sanatorium (Patients).	Average Patients per day.	Cost of Provisioning.	Average Cost per Patient per day.*
			£ s. d.	s. d.
1st Quarter	4,700	52.22	499 10 8	2 1.51
2nd „	4,118	45.25	458 11 4	2 2.73
3rd „	3,443	37.42	421 3 6	2 5.36
4th „	3,187	34.64	379 11 11	2 4.59
Totals 1938	15,448	42.32	1,758 17 5	2 3.33
Totals for 1937	17,885	49.00	1,877 10 5	2 1.19

* This includes cost of provisioning staff.

CITY HOSPITAL, DERBY.

A General Hospital maintained under the Local Government Acts or the Public Health Acts.

Population served by the Institution : 139,700.

Staffing.

Medical Superintendent : R. G. COOKE, M.D., CH.B., M.R.C.S., L.R.C.P., D.C.O.G.

Resident. Whole Time.

No. of other resident medical staff : 4.

No. of visiting staff : 12.

Specialised services supplied—

Consulting Physician, Surgeon, Ear, Nose and Throat Surgeon, Ophthalmic Surgeon, Orthopædic Specialist, Neurological Surgeon, Radiologist, Gynæcologists (2), Anæsthetist, Dental Surgeon, Pathologist.

Number of—

- (a) Trained Nurses : 30 (including Matron and Assistant Matron).
- (b) Probationer Nurses : 58, and 6 Midwifery Pupils.
- (c) Assistant Nurses : 15 Sub-Probationers—Non-resident.
- (d) Male Attendants : No Male Nurses, 5 Porters, 1 Barber, 1 Ambulance Driver and 1 Ambulance Attendant.

Total number of beds provided in the Institution for Sick, Maternity and Mental Cases at 31st December, 1938 :—

- (a) for men : 91.
- (b) for women : 151.
- (c) for children (under 16 years of age) : 70. (Excluding cots in maternity wards).

Total : 312.

N.B.—These figures should agree with the totals of those in Columns 3, 5, 7, and 9 of Table I. overleaf.

Table showing the classification of the accommodation for sick, maternity and mental cases and the number of beds occupied on 31st December, 1938.

Classification of Wards.*	No. of Wards	BEDS.							
		MEN.		WOMEN.		CHILDREN (under 16 years of age)		Total.	
		Pro-vided.	Occu-pied.	Pro-vided.	Occu-pied.	Pro-vided.	Occu-pied.	Pro-vided.	Occu-pied.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
1. Medical	2	33	28	33	29	—	—	66	57
2. Surgical	2	33	28	33	29	—	—	66	57
3. Chronic sick†	2	15	18	15	14	—	—	30	32
4. Children	2	—	—	—	—	70	43	70	43
5. Venereal		Loch Ward in Boundary House Infirmary. Surgical Tuberculosis on Balconies. Adequate side ward accommodation.							
6. Tuberculosis									
7. Isolation††									
8. Maternity¶	3	—	—	60	26	—	—	60	26
9. Mental	2	10	8	10	9	—	—	20	17
(a) Lunacy Act, 1890									
(i) Short stay §		—	—	—	—	—	—	—	—
(ii) Long stay ‡		—	—	—	—	—	—	—	—
(b) Mental Treatment Act, 1930		Not accommodated in this Institution.							
(i) Voluntary									
(ii) Temporary									
10. Mental defectives		Accommodated in Boundary House Institution.							
11. Other.		—	—	—	—	—	—	—	—
TOTAL	13	91	82	151	107	70	43	312	232

3 and 9 are wards structurally sub-divided.

* If not classified as in Table, the wards used for more than one class of patient should be grouped. Cots in adult wards should be entered in column 7; children in adult wards (whether in beds or in cots) in column 8. Cots and infants in maternity wards should, however, be excluded.

† Patients needing hospital treatment because they are suffering from some chronic disease; also aged infirm persons whose medical and nursing needs approximate to those of chronic patients.

†† Reserved specifically for the isolation and treatment of infectious diseases, including puerperal sepsis.

¶ Exclusion of isolation and labour beds.

§ See sections 20 and 21 of the Lunacy Act, 1890.

‡ See sections 24 to 26 of the Lunacy Act, 1890.

Statistics relating to the year ended 31st December, 1938.

(A) IN-PATIENTS.

1. Total number of admissions (including infants born in hospital)...	3,260
2. Number of women confined in hospital (11 twin labours) ...	632
(Plus 14 confined before arrival).	
3. Number of live births	608
(Plus 14 born before arrival).	
4. Number of still births	33
(Plus 2 born before arrival).	
5. Number of deaths among the newly-born (i.e., under four weeks of age)*	30

6. Total number of deaths among children under one year (including those given under 5)	39
7. Number of Maternal deaths among women admitted to hospital for confinement	1
8. Total number of deaths	415
9. Total number of discharges (including infants born in hospital)...	2,855
10. Duration of stay of patients included in 8 and 9 above. Give number of cases whose total stay was for the following periods—	
(a) Under four weeks	2,329
(b) Four weeks and under thirteen weeks	766
(c) Thirteen weeks or more	175
11. Number of beds occupied(excluding cots in maternity wards)—	
(a) Average during the year	240
(b) Highest (on 18th May, 1938)	284
(c) Lowest (on 29th August, 1938)	185
12. Number of surgical operations under general anæsthetic— (Excluding Dental Operations)	680
Local and Spinal Anæsthetic	185
13. Number of abdominal sections	155
* This figure should relate only to children born in hospital.	

Age Groups of Deaths.

Under one month	30
Over 1 month and under 1 year	9
1 year—10 years	7
10 „ —20 „	6
20 „ —30 „	13
30 „ —40 „	30
40 „ —50 „	24
50 „ —60 „	60
60 „ —70 „	122
70 „ —80 „	87
Over 80	27

(B) OUT-PATIENTS.

1. Certain cases attend after discharge for continuation of treatment, such as dressings, massage, re-examination, etc. Emergency treatment is given to accidents occurring in the locality.
2. Total number of persons seen in the out-patient department: 974.
3. Number of these persons who were subsequently admitted for in-patient treatment in the Institution: 553.
4. Number of these persons who had received in-patient treatment in the Institution: 195.
5. Total number of attendances in the out-patient department: 2,724.
6. Ante-Natal Clinic. The total number of expectant mothers seen and the total number of attendances: 734 women made 3,958 attendances.

Post-Natal Clinic.—The total number of women seen and the total number of attendances: 176 women made 177 attendances.

(C) Classification of In-patients who were discharged from or who died in the Institution during the year ended 31st December, 1938.

DISEASE GROUPS.	Children under 16 years of age.		Men and Women.	
	Dis- charg'd	Died.	Dis- charg'd	Died.
A. Acute infectious disease (1) ...	18	—	11	2
B. Influenza (2)	2	—	15	2
C. Tuberculosis—				
Pulmonary	4	—	28	8
Non-Pulmonary	3	2	8	3
D. Malignant disease	—	—	37	66
E. Rheumatism—				
(1) Acute rheumatism (rheumatic fever), together with sub-acute rheumatism and chorea ...	9	—	7	1
(2) Non-articular manifestations of so-called "rheumatism" (muscular rheumatism, fibrositis, lumbago and sciatica)...	3	1	15	—
(3) Chronic arthritis	1	—	128	1
F. Venereal disease	—	—	9	5
G. Puerperal pyrexia including cases classified (in London) ...	—	—	15	1
as puerperal fever—				
(a) Women confined in the hospital				
(b) Other cases				
H. Other diseases and accidents connected with pregnancy and childbirth	3	32	178	1
I. Mental diseases—				
(a) Senile Dementia	—	—	23	1
(b) Other	3	—	128	3
J. Senile decay (3)	—	—	8	36
K. Accidental Injury & Violence (4)	10	—	68	17
In respect of cases not included above :—				
L. Disease of the Nervous System and Sense Organs	18	2	59	20
M. Disease of the Respiratory System	153	5	143	35
N. Disease of the Circulatory System	—	1	134	81
O. Disease of the Digestive System...	27	4	169	17
P. " " Genito-urinary "	12	1	88	39
Q. Disease of the Skin	32	—	43	1
R. Other diseases	31	2	109	25
S. Mothers and infants discharged from Maternity Wards and not included in the above figures—				
Mothers	—	—	628	—
Infants	584	—	—	—
T. Any person not falling under any of the above headings	1	—	—	—
*TOTALS ...	914	50	1941	365

*These figures should agree with those shown under 8 and 9 of Table II (A).

- (1) Including—with the exception of Acute Primary and Influenzal Pneumonia, Tuberculosis, Puerperal Pyrexia and Puerperal Fever—all generally notifiable diseases, together with Measles, German Measles, Chickenpox Whooping Cough and Mumps. Cases of Influenzal Pneumonia, Tuberculosis, Puerperal Pyrexia, Puerperal Fever (in London) and Acute Primary Pneumonia will be recorded respectively under Groups B, C, G, and M. Cases of Encephalitis Lethargica should be entered under Group A if acute and under Group L if chronic.
- (2) Including Acute Influenzal Pneumonia.
- (3) To be confined to cases and deaths in which no more specific diagnosis was practicable.
- (4) Including suicides, attempted suicides and poisoning cases.

(COPY).

Form M.C.W. 96a.

County Borough Council of Derby.

MATERNITY AND CHILD WELFARE.

Return relating to Maternity Hospitals and Homes maintained or subsidised by the Council during the year 1938.

1. Name and address of Institution : CITY HOSPITAL, DERBY.
2. Number of maternity beds in the Institution (exclusive of isolation and labour beds) : 60.
- 2a. Number of beds, if any, included under item 2 which have been allocated to, and reserved for, expectant mothers in need of hospital treatment : 12.
3. Number of Maternity Cases admitted during the year : 729.
- 3a. Number of women treated during the year in the beds shown against item 2a. (These women should be included also against item 3) : 76.
4. Average duration of stay : 14 days.
5. Number of cases delivered by—
 - (a) Midwives : 585 (plus 14 born before arrival). (11 sets of twins).
 - (b) Doctors : 58.
6. Number of cases in which medical assistance was sought by a midwife in Emergency : For Mother 86, for Baby 17.
7. Number of cases notified as—

Puerperal Pyrexia* : 12 + 15 abortions.
8. Number of cases of Pemphigus Neonatorum : Nil.
9. Number of infants not entirely breast-fed while in Institution : 97.
10. (a) Number of cases notified as Ophthalmia Neonatorum : 3.
 (b) Result of treatment in each case :—
 Condition in each case satisfactory on discharge.

*i.e., rise of temperature to 100·40 F. for 24 hours, or its recurrence within that period.

11. (a) Number of maternal deaths : 1.

(b) Cause of death in each case—

Booked case. Pelvic Thrombosis. Eclampsia—died one month after delivery.

12. (a) Number of infant deaths—

(i.) Stillborn : 35.

(ii.) Within 10 days of birth : 25+3 admitted after delivery.

(b) Cause of death in each case and results of post-mortem examination (if obtainable)—

Stillbirths. Obstructed labour, 6 ; Congenital Abnormalities, 3 ; Prematurity, 14 ; Prolapse of cord, 3 ; Placenta praevia, 6 ; born before arrival, 3.

Deaths within 10 days. Prematurity, 13 ; Atelectasis, 3 ; Congenital Cystic Kidneys, 1 ; Toxaemia, 3 ; Icterus Neonatorum, 1 ; Difficult Labour, 5 ; Hydrocephalus, 1 ; Convulsions, 1.

MASSAGE DEPARTMENT.

Number of Treatments : 6,805.

Massage and Exercises	...	...	...	3,561
Electrical	...	...	...	1,480
Ultra Violet Light	...	...	...	830
Infra Red Light and Radiant Heat	...	...	...	934

X-RAY DEPARTMENT.

Total number of examinations : 1,218.

Alimentary System (oesophagus, stomach, intestines, gall bladder)	...	...	225
Genito Urinary System	...	...	75
Respiratory System	...	...	409
Bones and Joints	...	...	426
Maternity	...	...	53
Miscellaneous	...	...	30

DENTAL DEPARTMENT.

Two clinics were held weekly—one for Ante-Natal cases and one for In-patients, Out-patients and Public Assistance (Boundary House) cases. Dental inspection is carried out on all expectant mothers, and treatment given where needed. Of 515 who were examined only 152 did not require treatment. The provision of dentures was included at these clinics, mainly for Public Assistance cases. (See page 30 for table of figures).

PATHOLOGICAL DEPARTMENT.

Total number of investigations : 5,550.

EXAMINATION OF BLOOD.

Blood Counts	...	...	...	...	1,457
Blood Calcium Estimation	...	...	...	...	1
Blood Sugar Estimation	...	...	...	...	576
Blood Urea Estimation	...	...	...	...	348
Blood Cultures	...	...	...	...	65
Blood Grouping	...	...	...	...	57
Widal Tests	...	...	...	...	16
Van den Bergh reaction	...	...	...	...	27
Blood Sedimentation Rates	...	...	...	...	93
Kahn Tests	...	...	...	...	35
Miscellaneous	...	...	...	...	30
Total	...	...	...	...	<hr/>2,705

EXAMINATION OF URINE.

General Examination	...	...	...	...	841
Urea Concentration Tests	...	...	...	...	92
Urea Clearance Tests	...	...	...	...	77
Esbach's Reactions	....	....	....	....	92
Miscellaneous	...	...	...	...	55
Total	...	...	...	...	<hr/>1157

MICROSCOPICAL SECTIONS.

Total	184
-------	-----	-----	-----	-----	-----	-----

EXAMINATION OF GASTRIC CONTENTS.

Fractional Test Meals	119
-----------------------	-----	-----	-----	-----	-----

EXAMINATION OF SWABS.

Throat	...	...	...	...	...	429
Cervical	...	...	...	...	...	113
Urethral	...	...	...	...	...	67
Vaginal	...	...	...	...	...	180
Nasal	...	...	...	...	...	6
Eye ...	...	...	...	...	...	21
Mouth	...	...	...	...	...	4
Various	...	...	...	...	...	33
Total	...	...	...	...	...	<hr/>853

EXAMINATION OF OTHER PATHOLOGICAL SPECIMENS.

Cerebro Spinal Fluid	...	...	...	94
Pleural Fluid	...	...	...	31
Various other Fluids	...	...	...	31
Pus from Various sites	...	...	...	95
Faeces	...	...	...	193
Hair from Ringworm spores	...	...	...	32
Sputum	...	...	...	52
Miscellaneous	...	...	...	4
Total	...	...	...	532

In addition to the above, which are carried out in the hospital laboratory, there are many hundreds of tests carried out elsewhere by arrangements.

Examination of Sputum and Throat Swabs at Borough Isolation Hospital Laboratory.

Wassermann Reactions at County Council Laboratory.

Ascheim zondek test for Pregnancy at Edinburgh University.

The work of the hospital shows a steady increase.

(COPY).

Form Hosp. 7.

TREATMENT OF CANCER.**County Borough Council of Derby.**

1. Names of Hospitals* belonging to the Council, to which cancer patients are admitted: City Hospital, Derby.

Nature of facilities for cancer treatment (operation, radium, deep X-rays) provided in these hospitals: Surgical treatment. Radium on loan when required. Radon obtained when required.

Which, if any, of these hospitals have out patient departments? City Hospital. Continuation treatment or observation of progress of cases.

2. What arrangements have been made by the Council, under a specific agreement or otherwise, for treatment at other hospitals of cancer patients for whom adequate treatment facilities are not available in the Council's Hospital(s) ?

Arrangements are in force whereby any patient likely to obtain benefit from deep X-rays is transferred without fee to the Derbyshire Royal Infirmary.

* Including all Institutions of the Council used for the accommodation of the sick.

III. Statement of Cancer Patients for 1938.

Total number of patients admitted to Hospital of the Council—104.

A.

B.

C.

SITES.	Patients admitted after previous advice or treatment at another hospital providing radiation as well as operative treatment.		Patients admitted after previous advice or treatment at another hospital but not radiation treatment.				Patients admitted without previous advice or treatment at another hospital.		
	Total Number— 44.		Total number —				Total number—60.		
	Numbers treated at that hospital. (1)	Numbers not treated at that hospital. (2)	Numbers retained in Council's hospital. (3)	Numbers referred for advice and/or treatment to a hospital providing radiation treatment † (4)	Numbers retained in Council's hospital. (5)	Numbers referred for advice and/or treatment to a hospital providing radiation treatment. † (6)	Numbers retained in Council's hospital. (7)	Numbers referred for advice and/or treatment to :— (i) Hospital providing operative treatment. (8) (ii) Hospital providing radiation as well as operative treatment. † (9)	
Uterus ...	8	—					5	—	1
Tongue and Mouth	4	—					—	—	2
Breast ...	5	—					2	—	—
Lip ...	1	—					1	—	—
Skin ...	1	—					—	—	2
Larynx ...	—	—					—	—	—
Bladder ...	2	—					—	—	—
Rectum ...	5	—					5	—	—
Other sites ...	18	—					32	—	10
TOTAL ...	44	—					45	—	15

All cases of cancer likely to receive benefit are seen by the radio-therapist who is also the radio-therapist at the Royal Infirmary. If suitable, he arranges for deep X-ray therapy.

† Columns 4, 6 & 9, cases in which the radio-therapist gives advice or treatment within the Council's hospital should be regarded as referred to another Hospital.

vii.--SANITARY
CIRCUMSTANCES OF THE AREA.

REPORT BY

MR. H. J. MORGAN, Chief Sanitary Inspector.

SANITARY CIRCUMSTANCES OF THE AREA.

TO THE MEDICAL OFFICER OF HEALTH

FOR THE COUNTY BOROUGH OF DERBY.

It is my duty to submit to you my Annual Report on the Sanitary circumstances of the Borough for the past year—1938.

The order in which the details are arranged are somewhat different from preceding years as I have this time kept as strictly as possible to the instructions as laid down by the Ministry.

As in previous years, the large amount of work entailed by the Housing Acts, disinfestation of all furniture and the removal of the goods and chattels to new houses, made extra work for the Department. Many of the newer Acts were only partly attended to owing to lack of staff, but this will certainly be remedied in the coming year.

WATER SUPPLY.

It is the custom of this office to take each month a sample of water from three domestic taps at distant parts of the Borough, and reports (condensed and tabulated), furnished by the County Bacteriologist are herewith given.

Controversial matters arising out of these reports (which were somewhat disquieting) were dealt with by the Health and Water Committees, and personal inspections were made by the Bacteriologist, and the Medical Officer of Health.

<i>Register No.</i>	<i>Date.</i>	<i>Result.</i>	<i>Bacteriologist's Remarks.</i>
3	24/1/38	Presumptive B. Coli 3 per 100 c.cm. On subculture Bacillus Coli of faecal type, Type I was found present and also B. Aerogenes Type I.	
4	24/1/38	Showed presumptive B. Coli 1 per 100 c.cm. On subculture Bacillus Coli of faecal type, Type I was found present.	
5	24/1/38	Showed presumptive B. Coli 20 per 100 c.cm. On subculture B. Coli of faecal type, Type I was found present.	
16	21/2/38	No B. Coli in 100 c.c.	
17	21/2/38	No B. Coli in 100 c.c.	
18	21/2/38	No B. Coli in 100 c.c.	

Register No.	Date.	Result.			Bacteriologist's Remarks.
		No. of Bacteria per c.c. in Agar Agar after 48 hrs. incubation at 37° C.	No. of Bacteria per c.c. in Agar Agar after 72 hrs. incubation at 20° C.	Pre- sumptive B. Coli in 100 c.c.	
10	28/3/38	43	304	—	This sample of water showed large numbers of bacteria indicating some extraneous matter had gained access to this water. Not at present fit for drinking.
11	28/3/38	1	10	—	Bacteriologically this sample was found fit for drinking purposes.
12	28/3/38	4	5	—	Do. do.
13	25/4/38	3	6	—	Do. do.
14	25/4/38	4	18	—	Do. do.
15	25/4/38	3	14	—	Do. do.
21	23/5/38	5	36	—	Do. do.
22	23/5/38	4	18	—	Do. do.
23	23/5/38	1	12	—	Do. do.
24	27/6/38	—	16	—	Do. do.
25	27/6/38	2	10	1	Do. do.
26	27/6/38	4	6	—	Do. do.
32	27/7/38	8	32	1	Do. do.
33	25/7/38	4	82	1	Do. do.
34	25/7/38	2	200	1	Do. do.
47	29/8/38	20	70	1	Do. do.
48	29/8/38	1,920	Thou- sands— uncount- able	1	Bacteriologically this sample was found unfit for drinking purposes.

<i>Register No.</i>	<i>Date.</i>	<i>Result.</i>			<i>Bacteriologist's Remarks.</i>
		<i>No. of per c.c. in Agar Agar after 48 hrs. incu- bation at 37° C.</i>	<i>No. of per c.c. in Agar Agar after 72 hrs. incu- bation at 20° C.</i>	<i>Pre- sumptive B. Coli in 100 c.c.</i>	
49	29/8/38	8	28	1	Bacteriologically this sample was found fit for drinking purposes.
50	26/9/38	34	292	50	Bacteriologically this sample was found unfit for drinking purposes.
51	26/9/38	4	24	—	Bacteriologically this sample was found fit for drinking purposes.
52	26/9/38	2	42	1	Do. do.
53	24/10/38	8	44	3 Faecal Coli.	Bacteriologically this sample was found unfit for drinking purposes.
54	24/10/38	4	14	1	Bacteriologically this sample was found fit for drinking purposes.
55	24/10/38	1	26	3 Faecal Coli.	Bacteriologically this sample was found unfit for drinking purposes.
57	29/11/38	16	66	11	Bacteriologically this sample was found not to be suitable for drinking purposes according to the standards recommended by the Ministry of Health. The relatively high content of presumptive B. Coli is indicative of recent pollution.
58	29/11/38	30	140	17	Do. do.
59	29/11/38	9	46	5 Inter- mediate Type 2	Bacteriologically this sample was of doubtful hygienic quality for drinking purposes according to the standards recommended by the Ministry of Health.

An extension to the water mains to supply a small hamlet called Markeaton was carried out and the farms and houses supplied.

Mr. T. B. Farrington, Water Engineer, reports as follows :—

“ Various extensions in connection with building operations have been made to existing water mains.”

The supply of water has been satisfactory, both in quality and quantity.

I also append copy of the last analysis of water made by the Borough Analyst :—

The following are the results of analysis of the three samples of water received from you on the 6th July, 1938 :—

					Mixed Water High Service.	Mixed Water Low Service.	Supply in Town. High Service.
pH Value	...	...	...	...	7.3	7.3	7.3
					PARTS PER 100,000.		
Total Solid Matter	...	...	...	...	16.3	22.1	17.7
Organic and Volatile Matter	...	...	...	...	1.8	3.1	2.2
Mineral Residue	...	...	...	...	14.5	19.0	15.5
Nitrogen as Free and Saline Ammonia	...	...	...	...	0	0	0
Nitrogen as Albuminoid Ammonia	...	...	...	...	0.0012	0.0026	0.0012
Nitrogen as Nitrites	...	...	...	...	0	0	Faint trace
Nitrogen as Nitrates	...	...	...	...	0	0.05	0
Chlorine	...	...	...	...	1.8	2.1	1.9
Oxygen absorbed in 4 hours at 80°F.	...	...	...	...	0.054	0.034	0.047
Hardness {	Temporary	...	...	...	7.6	11.1	8.6
	Permanent	...	...	...	3.8	4.6	4.2
	Total	...	...	...	11.4	15.7	12.8
Metals—Iron less than	...	...	...	...	0.005	Nil	0.005
Appearance in 2ft. Tube	...	...	...	...	Clear	Yellowish	brown
MINERAL ANALYSIS.							
Silica	...	...	...	...	0.35	0.46	0.43
Oxides of Iron and Alumina	...	...	...	...	0.15	0.09	0.09
Lime, CaO	...	...	...	...	4.88	6.62	5.47
Magnesia, MgO	...	...	...	...	1.00	1.45	1.14
Sulphuric Anhydride, SO ₃	...	...	...	...	3.02	3.62	3.16

The acids and bases may be combined to give the following probable composition :—

Silica	...	...	...	...	0.35	0.046	0.43
Oxides of Iron and Alumina	...	...	...	...	0.15	0.09	0.09
Calcium Carbonate	...	...	...	...	7.60	11.10	8.60
Calcium Sulphate	...	...	...	...	1.51	1.00	1.58
Magnesium Sulphate	...	...	...	...	2.98	4.33	3.40
Sodium Sulphate	...	...	...	...	0.27	0.27	—
Sodium Chloride	...	...	...	...	2.97	3.46	3.13
Sodium Nitrate	...	...	...	...	—	0.30	—

In appearance the samples were clear and of a yellowish-brown colour.

The analytical results show the presence of only small proportions of unoxidised organic matter, and there is no indication of the occurrence of pollution.

So far as the chemical analyses are concerned, these waters may be classed as being of suitable quality for use for drinking purposes.

(Signed) R. W. SUTTON,
Borough Analyst.

Number of analyses taken during the year was as follows :—
Chemical—36. Bacteriological—55. Mineral—4.

Supply.

Number of gallons of water supplied to Derby from Public Supply
(Derby Water Area, which includes Borough and various
Parishes outside) 2,387,241,000
Gallons per day per head of population 33.18
Percentage of total quantity from the Derwent Valley Supply ... 52%

Used during the year.

	<i>Gallons</i>
Sewer Flushing	4,475,415
Street Watering	523,503
Steam Rolling	118,660

SEWERAGE.

The following information is supplied by Mr. E. H. Bennett, Borough Surveyor :—

Sewers cleaned out during the year.

The total length of sewers cleaned out represents about 9.3 miles. Total loads of silt—316.

Manholes cleaned out during the year 1,023

New Sewers laid during the year.

Victory Road	151 yds.
Burton Road	113 „
Windmill Hill Lane	117 „
Friar Gate to Queen Street	90 „
Victory Road rear of Qualcast and C.W.S.	216 „
Clarke Street	62 „
Hayes Avenue	213 „
Stenson Road (Sunny Hill 'Bus Turning Circle)	17 „
Raynesway	1,092 „
Roe Farm Housing Estate	1,291 „
Megaloughton Lane (I.C.I. Field)	96 „
Spondon Sewage Works	64 „
Ellesmere Avenue, London Road Estate	60 „
Radbourne Street, Westleigh Estate	252 „
New Road, Markeaton Estate	620 „
West Bank Avenue Estate	60 „
Brackensdale Avenue, Kingsway Estate	153 „
Lilac Avenue, Kingsway Estate	40 „
Humbleton Drive, Kingsway Estate	321 „
St. Wystan's Road, St. Cuthbert's Road, St. Alban's Road Estate	300 „
	5,328 „

Manholes Constructed during the year.

Victory Road	...	...	...	...	...	...	...	1
Sinfin Lane (Combustion Works)	...	...	...	...	...	...	...	2
Victory Road (rear of Qualcast and C.W.S. Works)	...	...	...	...	...	...	...	4
Cattle Market Thoroughfare	...	...	...	...	...	...	...	1
Burton Road Improvement	...	...	...	...	...	...	...	2
Windmill Hill Lane	...	...	...	...	...	...	...	4
Friar Gate to Queen Street Improvement	...	...	...	...	...	...	...	1
Hayes Avenue	...	...	...	...	...	...	...	2
Raynesway	...	...	...	...	...	...	...	15
Roe Farm Housing Estate	...	...	...	...	...	...	...	18
Ellesmere Avenue, London Road Estate	...	...	...	...	...	...	...	1
Radbourne Street, Westleigh Avenue	...	...	...	...	...	...	...	6
New Road, Markeaton Estate	...	...	...	...	...	...	...	12
West Bank Avenue Estate	...	...	...	...	...	...	...	2
Brackensdale Avenue, Kingsway Estate	...	...	...	...	...	...	...	2
Lilac Avenue, Kingsway Estate	...	...	...	...	...	...	...	1
Humbleton Drive, Kingsway Estate	...	...	...	...	...	...	...	2
St. Wystan's Road and St. Cuthbert's Road, St. Alban's Road Estate	...	...	...	...	...	...	...	5
								81

Work is in progress on an extension of the Drainage Scheme which is now approximately half completed, and full particulars of which are in the possession of the Ministry of Health.

Individual cases of brookcourse pollution have been dealt with during the year, each case being dealt with as reported.

RIVERS POLLUTION.

I believe that our brooks, through long insistence by this Department, are now free from pollution, except in one case, which cause I trust will shortly be removed.

Closet Accommodation.

With the exception of about 30 trough closets, three waste water closets, 30 tub closets, six privies, five cesspools, and two chemical closets, the whole of the Borough is fitted with water closets, but I see that with the extension of houses or factories in the Rural part of the Borough, a tendency is expressed to go back to primitive conditions which doubtless will cause me to emphasise my own opinions, at a time when I thought the Housing Acts had shown me the dawn of light and that this side of our work had become merely negligible.

REFUSE COLLECTION AND DISPOSAL.

Mr. A. Connor, Cleansing and Transport Superintendent, reports as follows :—

In June, 1938, the new Refuse Disposal Works in Stores Road were opened.

The completion of these works at a total cost of £22,663, marks a further stage in the process of re-organisation of the Public Cleansing Services of the town.

Refuse from the town centre and north side of the Borough will be dealt with at these works as hygienically and economically as the most up-to-date methods of mechanical treatment can ensure.

From the south side of the town the refuse collected will still be disposed of by the method of "controlled tipping," a most satisfactory means of reclaiming low-lying lands, etc.

The new plant is the latest type of separation and incineration plant, and apart from the sorting of salvable materials at the picking table, the refuse is mechanically dealt with throughout. 80—100 tons of crude refuse is dealt with per 8-hour day.

Refuse Disposal.

Controlled Tipping—Alvaston Tip	...	...	...	29,516 Tons.
—Other Tips	...	...	...	Nil.
Burned in the Destructors	...	...	...	10,738 Tons.
				<hr/> 40,254 Tons. <hr/>

Moveable Ashbins Provided.

Housing Committee	...	...	...	...	...	1,039
Private Owners	...	...	...	...	...	228
						<hr/> 1,267 <hr/>
Number of Cats, Dogs, etc., disposed of	...	...	...	...	...	2,960

Power Vehicles utilised for Cleansing Purposes.

1. Collection of Refuse :—						
Petrol Motor	...	...	...	...	...	12
Horse Drawn	...	...	...	...	...	2
2. Street Cleansing and Watering :—						
Petrol Motor	...	...	...	...	...	5
						2 Lacre Sweepers.

INSPECTIONS AND NOTICES.

Informal Action.

During the year, 1,454 Preliminary Notices were served to abate nuisances under the Public Health Acts or Local Acts, and 179 under Section 9 of the Housing Act, 1936.

Legal Action.

During the year, 266 Statutory Notices were served to abate nuisances under the Public Health Acts or Local Acts, and 303 under Section 9 of the Housing Act, 1936.

Visits and Remedies.

During the year, 14,023 visits under the Public Health Acts or Local Acts, and 13,377 under the Housing Acts, were made.

The nuisances abated and the defects remedied will be found on pages 153, 154, 161 and 162.

WORK DONE UNDER PUBLIC HEALTH AND ALLIED ACTS, OTHER THAN HOUSING ACTS.

Defects Remedied.

Accumulations ...	...	(Offensive) removed	...	...	...	25
Animals ...	...	Removed	...	...	...	—
		Nuisances abated	...	...	...	—
Ashpits ...	...	Demolished	...	...	...	3
		Repaired	...	...	...	—
		Dustbins provided	...	...	...	172
Drains ...	...	Cleansed	...	...	...	407
		Repaired	...	...	...	63
		Reconstructed	...	...	...	83
		Traps fixed	...	...	...	55
		Provided	...	...	...	8
		Disconnected from sewer	...	...	...	9
		Ventilation shafts fixed	...	...	...	23
		Manholes provided	...	...	...	48
		Manholes repaired	...	...	...	37
W.C.'s ...	...	Additional provided	...	...	...	32
		Fittings repaired	...	...	...	177
		Flushing water laid on	...	...	...	—
		Repaired	...	...	...	52
		Rebuilt	...	...	...	44
		Cleansed	...	...	...	12
Privies and		Converted to W.C.'s	...	...	...	—
Tub Closets	...	Demolished	...	...	...	—
Soilpipes...	...	Cleansed	...	...	...	—
		Repaired	...	...	...	2
		Provided	...	...	...	6
Urinals ...	...	Provided	...	...	...	—
		Repaired	...	...	...	—
		Reconstructed	...	...	...	—
Sinks ...	...	Provided	...	...	...	21
		Repaired	...	...	...	2
		Renewed	...	...	...	89
Wastepipes	...	Provided	...	...	...	39
		Repaired	...	...	...	29
		Cleansed	...	...	...	1
		Disconnected from drain	...	...	...	—
		Efficiently trapped	...	...	...	2
Spouting	...	Cleansed	...	...	...	67
		Repaired	...	...	...	137
		Renewed	...	...	...	18
		Provided	...	...	...	17
		Disconnected from drain	...	...	...	50
		Soft water pumps repaired	...	...	...	—
		Soft water pumps removed	...	...	...	29
		Soft water cisterns filled in	...	...	...	28
		Soft water cisterns cleansed	...	...	...	—
Houses ...	...	Cellars cleansed	...	...	...	23
		Cleansed, limewashed, etc.	...	...	...	31
		Dampcoursed and made dry	...	...	...	78
		Overcrowding prevented	...	...	...	5
		Paving of yards and passages repaired...	...	...	...	122
		Roofs repaired	...	...	...	288
		Floors repaired	...	...	...	204
		Walls repaired	...	...	...	74
		Stairs repaired	...	...	...	26
		Windows repaired	...	...	...	214
		Firegrates repaired	...	...	...	166
		Plaster repaired	...	...	...	170
		Rooms ventilated	...	...	...	15

Manure	Accumulations removed	7
	Pits abolished	1
	Pits repaired	—
	Moveable receptacles provided	4
Stables	Cleansed	12
	Drained	—
	Re-paved	—
Water	Wells closed	—
	Wells filled in	—
	Town water provided	—
	Fittings repaired	15
Other nuisances or defects remedied		366
Common lodging houses... ..		25
Houses let in lodgings		24
Dairies, Cowsheds and Milkshops		24
Bakehouses		31
Food-preparing premises		29
Factories and Workshops		38
Offensive Trades		1
		3,780
Smoke Observations		18
Slaughterhouses—Contraventions		1
Merchandise Marks Act—Contraventions		25
		3,824

Inspectors' Visits—14,023 Notices served—1,454.

Shops and Offices.

Owing to lack of staff, Sections 10, 11, 12 of the Shops Act, 1934, and the Clauses in the Public Health Act were left unattended.

Camping Sites.

There are no camping sites in the Borough, but certainly there are one or two places where a few caravans put up, and to which the attention of the staff is being given.

Smoke Abatement.

Number of chimneys of which observations have been taken ...	9
Number of observations	15
Visits to works	25

Swimming Baths and Pools.

There are three indoor swimming baths in the Borough and two open-air baths, and samples of water (tabulated below) have been taken to ensure the quality of supply. It will be noted that an earlier sample of one of the indoor baths was unsatisfactory, but the measures applied produced proper conditions.

Source of Sample.	Date.	No. of per c.c. in Agar after 48 hrs. incu- bation at 37° C.	No. of per c.c. in Agar after 72 hrs. incu- bation at 20° C.	Pre- sumptive B. Coli in 100 c.c.	Bacteriologist's Remarks.
Gala Bath, Queen Street Intake	12/8/38	4	2	—	Bacteriologically this sample was satisfactory as a bath water.
Gala Bath, Queen Street Outgo.	12/8/38	2	2	—	Do. do.
Ladies' Bath, Queen Street Intake.	12/8/38	120	180	—	Bacteriologically this sample was not satisfactory as a bath water, the count at 37° C. being too high.
Ladies' Bath, Queen Street Outgo.	12/8/38	1,280	1,600	—	Bacteriologically this sample was not satisfactory as a bath water, the counts at 37° C. and 20° C. being too high.
Reginald Street Baths Intake.	12/8/38	2	4	—	Bacteriologically this sample was found to be satisfactory as a bath water.
Reginald Street Baths— Outgo.	12/8/38	—	18	—	Do. do.
Adults' Bath, Bass's Recreation Ground— Shallow End.	12/8/38	Millions —un- count'ble	Millions —un- count'ble	180+	Bacteriologically this sample was found to be totally unsatisfactory as a bath water.
Adults' Bath, Bass's Recreation Ground— Deep End	12/8/38	Millions —un- count'ble	Millions —un- count'ble	180+	Do. do.
Children's Bath, Bass's Recreation Ground— Shallow End.	12/8/38	Millions —un- count'ble	Millions —un- count'ble	180+	Do. do.
Children's Bath, Bass's Recreation Ground— Deep End.	12/8/38	Millions —un- count'ble	Millions —un- count'ble	180+	Do. do.
Ladies' Bath, Queen Street— Intake.	19/8/38	10	20	—	Bacteriologically this sample was satisfactory as a bath water.
Gala Bath, Queen Street— Intake.	19/8/38	4	8	—	Do. do.

Eradication of Bed Bugs.

Number of Council Houses found to be infested	...	...	...	58
„ „ „ „ disinfested	...	...	...	58
„ „ other houses found to be infested	...	...	...	65
„ „ „ „ disinfested by Corporation	...	...	...	51
„ „ notices served on tenants	...	...	...	4
„ „ verbal notices to tenants	...	...	...	1
„ „ notices served on owners	...	...	...	7
„ „ sprays loaned and/or purchased	...	...	...	48

During the year, H.C.N. gas and Cimex fumigation have been used for the eradication of bed bugs in Council houses.

In all other houses the rooms are first sprayed with Clensel Insecticide from a high pressure spray. By arrangement with the owner or agent, the walls are then stripped of all paper and the skirtings, architraves, mouldings, etc., are removed, cleansed, and gone over with a painter's blowlamp, this being carried out by a firm of the owner's choice. Twenty-one days after the first spraying the rooms are again sprayed, this time with Zaldecide and the tenant is then loaned a hand spray and supplied with Clensel Insecticide and Clensel soap. The tenant is asked to co-operate by spraying at regular intervals with the insecticide and by washing all dirty floors, woodwork, etc., with the soap, and where this following-up process is used, most satisfactory results are obtained. When a house is sprayed by the Corporation, the owner is only charged the cost to the Department, so that no profit is made.

Before entering a Council house, all verminous tenants have their furniture and belongings fumigated by H.C.N. at the Health Department's gassing station in Ford Street. This work is carried out by members of the Health Department staff.

Houses of furniture, etc., disinfested during the year	...	...	120
Total since the commencement	...	...	1,129
Slum clearance families moved during the year	...	...	65

Council houses were fumigated by H.C.N. gas process and Cimex fumigation, the H.C.N. work being carried out by a specialist firm, Messrs. Associated Fumigators Ltd., 112, Victoria Dock Road, London, E.16, and the Cimex treatment by the Corporation's own workmen.

Two Female Home Advisers are employed by the Estates Committee, who visit Council houses periodically with a view to preventing them becoming infested, and advise the tenants on matters of cleanliness to prevent infestation.

HOUSING.

The lack of houses available for the removal of persons from uninhabitable houses has reduced our efforts to a tremendous extent. Hundreds of houses are known both to us and the landlords to be beyond repair, and of course one must sit down with folded hands or give attention to better houses that can decently be put in condition. However, a considerably sized "Re-development Area" was put forward and given a welcome by the combined committees, conditional on the satisfactory reports of the officials concerned.

Again I wish to emphasise, as I have done in previous reports, the serious lack of available houses and the terrible crippling of my efforts to make this town a better place to live in.

As regards houses of the working classes, let me state once more that the standards on which I insist are of the highest and I will tolerate nothing less. I see no reason why all houses of this class should not be fitted with baths and I am steadily securing a foothold in the installation of these necessary conveniences. That they are necessary is proved by the fact that no house nowadays is built without one, and since the Housing Act clearly states that, in determining whether a house is fit "regard shall be had to the extent to which the house falls short of the general standard of housing accommodation for the working classes in the district," therefore I say that houses without baths are not in conformity with the standards as laid down in the Act.

Reference to the table of work done under the Housing Act will show that a start has been made and again I wish to state that it is but the beginning of the next stage in raising the standard of housing accommodation for the working classes.

A summary of the representations by the Medical Officer of Health and the results are appended to the usual Ministry of Health form on page 158 in paragraph "G. Extra."

Housing Statistics.

1. INSPECTION OF DWELLING-HOUSES DURING THE YEAR.

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ...	1,945
(b) Number of inspections made for the purpose ...	20,582
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which are inspected and recorded under the Housing Consolidated Regulations, 1925 ...	703
(b) Number of inspections made for the purpose ...	13,377
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation... ..	116
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ...	1,523

2. REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES :—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	1,391
--	-------

3. ACTION UNDER STATUTORY POWERS DURING THE YEAR :—

A.—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :—

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	303
--	-----

(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners	284
(b) By local authority in default of owners	1

B.—Proceedings under Public Health Acts :—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	266
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) By owners	134
(b) By local authority in default of owners	—

C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

(1) Number of dwelling-houses in respect of which Demolition Orders were made	107
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	110
(3) Undertakings fulfilled	18

D.—Proceedings under Section 12 of the Housing Act, 1936 :—

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	1
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined the tenement or room having been rendered fit	—

G (Extra).

Representations to Committee by Medical Officer of Health (Secs. 1 and 19)	1,489
---	-------

Areas :—

(a) No. of areas submitted to Ministry	19
No. of houses affected	488
Excluded from areas by Ministry of Health	27
No. of houses demolished	454
Houses closed but not yet demolished	7

Individual Unfit Houses :—

Houses demolished	704
Undertakings fulfilled	76
Parts of Buildings closed (Section 20)	10
Houses closed but not yet demolished	73

Removals from Condemned Houses :—

By the Corporation	908
Found own Accommodation	353

EXTRACT FROM THE QUARTERLY PROGRESS REPORT TO THE MINISTRY.

POSITION AT 31ST DECEMBER, 1938.

Action taken under the Housing Act, 1930, and the corresponding Provisions in the Housing Act, 1936.

1.	Number of Dwelling-houses demolished.		Number of Persons displaced up to 31/12/38.	Number of Dwelling-houses made fit.
	Unfit Houses. 2.	Other Houses. 3.		
PART A.				
Clearance Areas :—				
(i.) Land col. Pink ...	454	—	} 1725	—
(ii.) Land col. Grey ...	—	4		—
PART B.				
Improvement Areas.	—	—	—	—

PART C.—Insanitary houses not included in clearance areas or improvement areas.

NOTE.—The references relate to Sections of the Act of 1930. Details of action taken under the corresponding provisions in the Act of 1936, should be included.

(1) Number of dwelling houses demolished as a result of formal procedure under Section 19	707
(2) Number of dwelling houses demolished as a result of informal notices preliminary to formal procedure under Section 19	16
(3) Number of dwelling houses closed but not demolished as a result of undertakings (which have not been cancelled) by owners under Section 19 not to use the houses for human habitation	3
(4) Parts of buildings closed (Section 20)	10
(5) Number of persons displaced as a result of action :—	
Under (1) above	2,628
„ (2) „	60
„ (3) „	5
„ (4) „	45
(6) Number of dwelling houses made fit :—	
(i.) as a result of formal notices under Sections 17—20	1,576
(ii.) as a result of informal notices preliminary to formal procedure under Sections 17 to 20	6,729

Housing Act, 1936. Part IV.—Overcrowding.

(a) No. of dwellings overcrowded at end of year... ..	243
No. of families dwelling therein	249
No. of persons dwelling therein	1,838
(b) No. of new cases of overcrowding reported during the year	11
(c) No. of cases of overcrowding relieved during the year	73
No. of persons concerned in such cases	516
(d) Particulars of any cases in which dwelling houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	nil

Fitness of Houses and Re-Conditioning.

The Housing Acts, in defining a house fit for human habitation, say that regard shall be had, amongst other things, "to the general standard of housing accommodation in the district." For all future purposes, and to emphasise the "standard" that exists in this district, figures are appended. They are a summary of the main items reported year by year since 1920, when operations first began under repair sections of the Housing Acts, and are culled from Annual Reports since that date. They are as follows :—

Houses made fit in all respects (including all amenities— coppers, sinks, water on sinks, larders, and all repairs) ...	13,965
Entirely new sinks provided where none existed before ...	1,691
Old sinks replaced by new... ..	2,955
Houses dampcoursed	3,201
Roofs, floors, firegrates, stairs, walls, etc., repaired	50,709
Wash coppers provided where none existed before	1,150
Wash coppers repaired	1,543
Larders provided where none existed before	2,760
Water laid on inside houses	1,869

In addition to vast numbers of other repairs, and not including the enormous figures detailed as done under the Public Health Acts.

The subjoined figures were contributed by the Estates Manager :—

Houses erected during the year 1938, January—December :—

(a) By Local Authority	218
By other bodies and persons	333
By other Local Authorities	Nil
	<hr/>
	551
	<hr/>

(b) With State assistance under the Housing Acts :—

By the Local Authority	139
For purposes of Part 2 of 1925 Act	139
For purposes of Part 3 of 1925 Act	Nil
For other purposes	Nil
By other bodies and persons	Nil
Number of houses owned by the Local Authority on weekly rental	6,855
Being purchased on instalment system	191
Held under Part 3 of Housing Act, 1925	4,544
Held under Part 2 of Housing Act, 1925	1,249
Held under Housing Act, 1919	729
Held under Housing Act, 1923	189
Non-Assisted Scheme... ..	144

Houses built in last two years :—

Held under Part 3 of Housing Act, 1925.

Built during 1937	...	...	...	...	...	...	...	Nil
Built during 1938	...	...	...	...	...	...	...	Nil

Held under Part 2 of the Housing Act, 1925, and under Housing Act, 1930 :—

Built during 1937	...	...	...	...	...	...	...	370
Built during 1938	...	...	...	...	...	...	...	139

Held under other Powers :—

Built during 1937	...	...	...	...	...	...	...	51
Built during 1938	...	...	...	...	...	...	...	79

There is still a shortage of houses available at reasonable rents, particularly for the alleviation of overcrowding.

Schemes are now before the Ministry and further schemes are included in the five years' programme for overcrowding, slum clearance and for aged people.

There are no special difficulties in the way of providing suitable sites, the Corporation having already acquired the necessary land.

The following is a summary of the activities carried out with the power of Section 9 of the Housing Act, 1936 :—

Section 9, Housing Act, 1936.	703
Number of houses inspected	439
Number of houses dealt with	179
Number of preliminary notices served	13,377
Number of re-inspections	...
Number of houses made " fit in all respects " or " Re-conditioned "	839

DEFECTS REMEDIED.

Dustbins	...	...	...	Provided	...	...	...	...	36
Drains	...	...	...	Cleansed	...	...	...	...	8
				Provided	...	...	...	...	23
				Repaired	...	...	...	...	9
				Renewed	...	...	...	...	5
				Trapped	...	...	...	...	1
Soilpipes and Vents	...	...	...	Repaired or renewed	...	...	...	...	28
Spouting	...	...	...	Cleansed	}	...	...	...	215
				Repaired		...	...	...	88
				Renewed	...	...	...	...	48
Spouting	...	...	...	Disconnected from drain	...	...	...	...	—
				Rainwater pumps repaired	...	...	...	...	18
				Rainwater pumps removed	...	...	...	...	26
				Rainwater cisterns filled in or demolished	...	...	...	...	68
Houses	...	...	...	Rainwater pipes disconnected	...	...	...	...	252
				Dampcoursed and made dry	...	...	...	...	1
				Cleansed, &c.	...	...	...	...	17
				Disinfested	...	...	...	...	1
				Overcrowding prevented	...	...	...	...	400
				Paving of yards, etc., repaired	...	...	...	...	154
				Roofs repaired	...	...	...	...	841
				Floors repaired	...	...	...	...	1082
				Walls—brickwork and pointing made good	...	...	...	...

Houses	...	...	...	Doors repaired or renewed...	...	203
				Windows repaired or renewed	...	776
				Stairs repaired or renewed...	...	346
				Firegrates repaired or renewed	...	423
				Plaster repaired or renewed	...	526
				Rooms ventilated	... ..	58
				Sculleries built	... ..	26
				Washing accommodation provided		22
				Wash-houses repaired	... ..	8
				Washcoppers repaired	... ..	73
				Sinks—New, provided	... ..	21
				Renewed	... ..	88
				Baths provided	... ..	7
				Wastepipes—Repaired or renewed		102
				Provided	... ..	21
				Provided with food stores	... ..	91
				Larders built	... ..	4
				Efficient lighting provided	... ..	1
				Chimneys rebuilt or repaired	...	454
				Coalhouses built	... ..	8
Water	...	...	...	Town water provided	... ..	15
				Service pipes or taps repaired	...	6
W.C.'s	...	...	...	Additional provided	... ..	2
				Fittings repaired or cleansed	...	160
				Flushing water laid on	... ..	—
				Repaired, rebuilt or cleansed	...	228
Outbuildings—Complaints removed	...	...	...			283
Other nuisances or defects abated or remedied	...	...	...			98
Total						7,376

MILK.

Constant efforts have been made to keep up a good supply of milk. There are three firms equipped for receiving, pasteurising, bottling, and retailing milk, besides two or three large firms dealing with unpasteurised supply. One of the firms mentioned caused a deal of trouble to your staff and as you know was brought before the Health Committee, on notice, to be dealt with.

The whole of the cows in the town (251) are inspected four times yearly by the Government Veterinary Inspector.

As regards the amount of milk, I estimate that weekly 332,000 pints of pasteurised and 66,000 pints of non-pasteurised milk are used in the Borough.

Some strange figures cropped up whilst obtaining these estimates and I give them herewith :—

Very little sterilised milk is sold.

No other heat-treated milk but pasteurised and sterilised milk is sold.

Very little tuberculin tested milk is sold.

About 85% of the milk of Derby is pasteurised, and now I come to one very strange feature—

The actual increase in customers of pasteurised milk during the last ten years has been well over 80%, but the average amount of milk drunk per customer has dropped from 10.51 to 9.83 pints per week.

Bottles and Cartons.

I am trying my hardest to obtain carton supplies of milk but so far without success. It is my intention to make determined efforts in the future to bring about this very much desired change from bottles, the use of which I fear is the cause of a lot of trouble to me. The cost of scrapping expensive plant is the great obstruction to my success however.

Dairies, Cowsheds and Milkshops.

PURVEYORS INSIDE THE BOROUGH—

Number of dairymen and purveyors by round ...	...	...	...	...	37
Number of retail roundsmen working from other dairies	...	...	...	...	22
Number selling loose milk from shops	...	...	...	...	32
Number of bottled milk sellers	...	...	...	...	297
Number of factory dairies	...	...	...	...	8
Cowkeepers within the Borough	...	...	...	...	11
					<hr/> 407 <hr/>

PURVEYORS OUTSIDE THE BOROUGH—

Registered Retail Purveyors residing outside the Borough	...	...	...	...	60
Number of Farmers sending Milk into Derby	...	...	...	...	271
Pasteurisation Factories in the Borough	...	...	...	...	3
Number of Local Farmers supplying Grade A " Accredited Scheme " milk	...	...	...	...	4

Inspections.

Cowsheds	...	...	...	...	...	...	...	...	73
Dairies	...	...	...	...	...	...	...	...	102
Milkshops, etc.	...	...	...	...	...	...	...	...	52
Cautions given	...	...	...	...	...	...	...	...	47

Examination of Milk for Tubercle Bacilli.

The number of samples examined was 151. The milk from 12 farms was found to contain tubercle bacilli, and in 10 cases the infected animals on 7 farms were found and slaughtered. In five cases Tubercle Bacilli was known to exist on the farm, but the Veterinary Inspector's report was not complete at the end of the year.

Clean Milk and Bacterial Count.

84 samples of milk were examined during the year as shown on the form on page 165. The attention of all farmers has been drawn to unsatisfactory milks.

Results of samples examined during the year :—

Accredited.	Satisfactory	...	...	...	...	...	25
	Unsatisfactory	...	...	...	...	...	9
Pasteurised.	Satisfactory	...	...	...	...	...	18
	Unsatisfactory	...	...	...	...	...	5
Tuberculin Tested.	Satisfactory	...	...	...	...	...	7
	Unsatisfactory	...	...	...	...	...	5
Ordinary Milk.	Satisfactory	...	...	...	...	...	10
	Unsatisfactory	...	...	...	...	...	5

County Laboratory Examinations.

T.B. Negative	...	...	...	...	...	...	139
T.B. Positive	...	...	...	...	...	...	12
Streptococci :—							
Positive...	...	...	...	...	...	...	—
Negative	...	...	...	...	...	...	4
Guinea Pig died before result was obtained	...	...					7
							<hr/>
						Total	162

Microscopic examinations :—

Negative	...	...	...	...	...	...	2
Positive...	...	...	...	...	...	...	—
							—
				Total	...	...	2
							—

Phosphatase Test :—

Number of samples	...	...	...	...	...	...	41
Number of samples which did not prove to be satisfactory	...						19

Methylene Blue and Coliform Tests :—

Number of samples	47
Number of samples that did not satisfy the Methylene Blue Test	10
Number of samples that did not satisfy the Coliform Test ...	7
Number of samples that did satisfy the Methylene Blue Test only	7
Number of samples that did satisfy both tests... ..	30

	Number of Organisms per 1 c.c.											
	Under 30,000	30,001 to 40,000	40,001 to 50,000	50,001 to 150,000	150,001 to 200,000	200,001 to 300,000	300,001 to 400,000	400,001 to 500,000	500,001 to 750,000	750,001 to 1,000,000	Over 1,000,000	Total
Bacillus Coli												
Negative	8	—	1	1	—	—	—	—	—	—	—	10
Positive ...	—	2	—	—	—	—	—	—	—	—	3	5
Total ...	8	2	1	1	—	—	—	—	—	—	3	15

Not included in above table:—

Accredited	34
Pasteurised	23
Tuberculin Tested	12
—	—
	69 + 15 = 84.

MEAT INSPECTIONS.

During the year, 211 carcasses of beef were condemned, and included in these were 76 cows slaughtered under the Tuberculosis Order, 1925, as suffering from tuberculosis, and found, on post mortem examination, to be in an advanced stage of the disease. The carcasses were totally condemned.

There have also been condemned 44 carcasses of veal, 45 carcasses of mutton and 28 carcasses of pork.

CARCASES CONDEMNED.

	<i>Cattle (excluding cows).</i>	<i>Cows.</i>	<i>Calves.</i>	<i>Sheep & Lambs</i>	<i>Pigs.</i>
<i>All diseases except Tuberculosis.</i>					
Whole carcasses condemned	7	40	41	45	19
Carcasses of which some part or organ was condemned ...	106	111	—	142	87
<i>Tuberculosis only.</i>					
Whole carcasses condemned	28	136	3	—	9
Carcasses of which some part or organ was condemned ...	173	366	—	—	362

Disposal of Condemned Meat.

During the year the whole of the meat and offals was disposed of for treatment for the recovery of fats, bones and meat, and their preparation for commercial purposes. The remainder of the unsound food was sent for destruction.

Unsound Food Condemned.

61 tons, 9 cwts. Meat, including offal.

701 Rabbits.

21½ cwts. of Fish and Shellfish.

189 Tins of Food.

3 tons, 6½ cwts. Fruit and Vegetables.

1,294 Shell Eggs.

44 lbs. Liquid Eggs.

180 lbs. Cooked Foods.

16 Poultry.

Slaughter-Houses.

At the end of year 1938 :—

In hands of private holders	...	...	...	...	...	23
Corporation slaughter houses let to private tenants...	...	...	...	...	...	16
Corporation slaughter houses used as public	...	...	...	...	...	1
Visits of inspection—9,865.						

Public Abattoir.

Slaughtering at the Corporation Houses is under the direct control of the Health Department.

SLAUGHTER OF ANIMALS ACT, 1933.**Slaughtermen's Licences.**

158 licences were issued during the year to butchers slaughtering within the Borough of Derby.

With few exceptions, every endeavour appears to have been made by the persons holding licences to strictly adhere to the requirements of the above Act.

TUBERCULOSIS ORDER, 1938.

Mr. E. A. HORNSBY, the Markets Superintendent, reports that :—

The above Order came into force on the 1st April, 1938, and replaces the Order of 1925.

The new Order provides that arrangements for the slaughter of diseased animals and the payment of compensation therefor are now matters for the Minister instead of the Local Authority.

The Local Authority still retains other duties, such as the service of notices requiring the detention and isolation of suspected animals, the adoption of precautions respecting milk, and also for the enforcement of notices requiring cleansing and disinfecting of premises on which there has been an infected animal.

The figures given below include the three months' administration under the old Order and nine months' under the new Order, and I am indebted to the Divisional Veterinary Inspector of the Ministry of Agriculture and Fisheries for information supplied in respect of administration under the new Order.

Total number of animals taken from premises within the Borough ... 5

Summary of above, viz. :—

Number of animals with Tuberculosis of the Udder	...	...	2
„ „ „ Tuberculous Emaciation	...	...	—
„ „ „ giving Tubercular milk	...	...	—
„ „ „ with chronic cough and showing definite clinical signs of Tuberculosis	...	...	3

Post mortem confirmed suspicions in all above cases.

Number of cases reported by owner	...	...	...	...	1
„ found when inspections made under Milk and Dairies Order	...	...	...	...	1
„ found in milk samples	...	...	...	...	3

Tubercular Cattle in Market.

Total number of animals suspected in the market	13
---	-----	-----	-----	----

Summary :—

<i>Number in milk.</i>	8
------------------------	---

Number with Tuberculosis of the Udder	...	...	...	...	—
„ „ Tuberculous Emaciation	...	...	...	...	1
„ giving Tubercular Milk	...	...	...	...	—
„ with chronic cough, etc.	...	...	...	...	7
„ sent back to farm	...	...	...	...	1
„ sent to knackers' yard	...	...	...	...	4
„ for slaughter	...	...	...	...	3

<i>Number not in milk.</i>	5
----------------------------	---

Number with Tuberculosis of the Udder	...	...	...	...	—
„ „ Tuberculous Emaciation	...	...	...	...	1
„ giving Tubercular milk	...	...	...	...	—
„ with chronic cough, etc.	...	...	...	...	4
„ sent back to farm	...	...	...	...	4
„ sent to knackers' yard	...	...	...	...	—
„ for slaughter	...	...	...	...	1

FOOD-PREPARING PREMISES.

Food-preparing Places on Register at end of year ...	...	...	...	173
Defects found and remedied	...	...	...	21

These inspections included restaurants, food stores, pork butchers, shops where food is cooked, and beef butchers' shops where the preparation and filling of sausages takes place. A general inspection of these premises has proved that a high standard of cleanliness is generally maintained.

Fried fish shops continue to show a marked improvement in all directions.

ICE CREAM MANUFACTURERS AND DEALERS.

Regular inspections of the premises and processes of manufacture were made, as also of retailers in the street.

On Register at end of year	...	...	...	...	...	252
Notices complied with	...	...	...	...	...	2

The number of people who manufacture and retail ice cream is fast declining and they are now obtaining their supplies from large manufacturers.

BAKEHOUSES.

Number of Bakehouses in occupation at end of year	...	...	50
Defects found during year	...	...	24
Defects remedied during year	...	...	25
Notices served	...	...	3

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

The following is the summary by the Borough Analyst (Mr. R. W. Sutton, B.Sc., F.I.C.) for the year 1938 :—

During the year, 319 samples were submitted under the above Act, consisting of 199 formal samples and 120 informal samples. This number represents sampling at the rate of 2.24 samples per 1,000 of population.

Of the samples submitted, 26 (or 8.2%) were classed as adulterated or below standard. This figure is somewhat higher than last year when 23 of the 307 samples (7.5%) were returned as adulterated and is higher than the return of 5.5% adulteration for the whole of the samples taken in England and Wales for the year 1937—the last year for which figures are available.

The figures may be compared with those obtained for other large areas in England for the year 1937.

ADULTERATION FIGURES FOR 1937.

<i>Authority.</i>	<i>Population.</i>	<i>No. of Samples.</i>	<i>Samples per 1,000 of population.</i>	<i>% Adul- terated.</i>
COUNTIES.				
Chester	558,066	1,615	2.89	8.4
Derby	520,512	2,088	4.01	6.4
Durham	900,368	2,496	2.77	7.3
Kent	881,221	5,814	6.60	1.8
Surrey	878,986	2,489	2.83	10.3
BOROUGHS.				
Birmingham ...	1,002,603	5,613	5.60	5.0
Bolton	177,250	577	3.26	5.2
Brighton	147,427	317	2.15	11.0
Huddersfield ...	113,475	385	3.39	3.9
Hull	313,649	2,711	8.64	5.2
Leeds	482,809	2,286	4.73	5.5
Leicester	257,718	1,789	6.94	6.4
Liverpool	856,072	8,622	10.07	4.0
Middlesborough ...	138,960	382	2.75	7.1
Nottingham	276,189	850	3.08	4.2
Oldham	140,314	304	2.17	3.9
Southampton ...	176,007	652	3.70	1.1
Wolverhampton ...	138,631	396	2.86	8.8

The various articles are listed in the following table and details are given of the number of samples found to be adulterated.

<i>Article.</i>	<i>Formal.</i>	<i>In- formal.</i>	<i>Total.</i>	<i>Adulterated or not up to standard.</i>	<i>% Adul- terated.</i>
Almonds, Ground ...		4	4		
*Arrowroot ...		4	4		
Baking Powder ...		4	4	1	25.0
Bicarbonate of Soda...		4	4		
*Butter ...	12		12		
Camphorated Oil ...		4	4		
Castor Oil ...		4	4		
Cheese ...		3	3		
Cheese, Crustless ...		1	1		
Coffee ...		4	4		
Condensed Milk ...		4	4	1	25
*Cordials ...		1	1		
*Corn Flour ...		4	4		
*Cream, Tinned ...		4	4		
*Crystallised Fruits—					
Mixed ...		2	2		
Mixed Peel ...		2	2		
Glace Cherries ...		1	1		
*Dried Fruits ...		7	7		
*Egg Substitute Powder		4	4	1	25
*Fish Paste ...		1	1		
*Fruit Drinks ...		3	3		
Ginger, Ground ...		4	4		
*Golden Syrup ...		2	2		
Honey ...		4	4		
*Jam ...		3	3		
Lard ...	9		9		
*Lemon Cheese ...		4	4		
*Margarine ...	8		8		
*Marmalade ...		1	1		
*Meat Paste ...		1	1		
*Milk ...	163	3	166	22	13.3
*Mincemeat ...		8	8		
Olive Oil ...		4	4		
Pepper		4	4		
*Potted Meat ...	1	2	3	1	33.3
Rice, Ground...		3	3		
Rum ...	3		3		
*Salad Cream ...		4	4		
Suet ...		3	3		
*Sweets ...		4	4		
*Treacle ...		1	1		
Whisky ...	3		3		
	199	120	319	26	8.2

* Examined for preservatives.

Milk Samples.

The percentage adulteration in the milk samples (13.3) is distinctly higher than last year and is higher than the figure returned by the Ministry of Health for all samples examined in England and Wales for 1937, i.e. 7.4%.

In addition to the 22 samples returned as adulterated, 6 samples were found to be slightly deficient in non-fatty solids. Application of the freezing point test indicated that these samples were probably genuine. They may therefore be classed as being of inferior quality.

Fourteen appeal to cow samples (7 of morning milk and 7 of evening milk) were examined and these were all satisfactory, the proportions of fat and non-fatty solids invariably exceeding the minimum limits contained in the Sale of Milk Regulations.

The average composition of all milks examined during the year is as follows :—

Non-fatty solids	...	...	8.76	per cent.
Fat	...	...	3.56	„ „
Total solids	...	...	12.32	„ „

The following table gives details of those samples classed as adulterated.

MILK SAMPLES.

Serial No.	Article.	Formal. or Informal.	Nature of Adulteration.	Observations.
1438	Milk	F.	About 1% Extraneous Water.	Suggested further samples.
1439	„	F.	7% Fat Deficient and 1% Extraneous Water.	„
1446	„	F.	14% Extraneous Water.	Fined £1 together with £4 4s. 0d. Costs.
1447	„	F.	3% Extraneous Water.	From same vendor as 1446.
1470	„	F.	8% Fat Deficient.	Suggested caution.
1475	„	F.	1% Extraneous Water.	Suggested further samples.
D.91	„	F.	2% Fat Deficient.	In course of delivery to vendor of No. 1470.
D.93	„	F.	8% Fat Deficient.	Cautioned.
1508	„	F.	3% Fat Deficient.	Suggested caution.
D.295	„	F.	1% Extraneous Water.	From same vendor.
D.296	„	F.	1% Extraneous Water.	Cautioned.
D.297	„	F.	1% Extraneous Water.	Suggested caution.
1520	„	F.	2% Extraneous Water.	Suggested caution.
1561	„	F.	6% Fat Deficient.	Suggested caution.
1563	„	F.	10% Fat Deficient.	Suggested caution.
1622	„	F.	1% Added Water.	Suggested caution.
1664	„	F.	24% Fat Deficient. About 5% Added Water.	Fined 10/- together with £3 13s. 6d. costs.
E.440	„	F.	About 4% added water	In course of delivery to vendor of No. 1664.
E.441	„	F.	About 5% added water	Fined £5
E.442	„	F.	About 6% added water	together with £3 3s. 0d. costs.
E.443	„	F.	About 7% added water	
E.445	„	F.	About 3% added water	

OTHER SAMPLES.

<i>Serial No.</i>	<i>Article.</i>	<i>Formal or Informal.</i>	<i>Nature of Adulteration.</i>	<i>Observations.</i>
1417	Condensed Milk ...	I.	Equivalent pints lower than declared. 1.375 declared. 1.25 found.	Suggested caution.
1431	Egg Substitute Powder ...	I.	Deficient in available Carbon Dioxide.	
1454	Baking Powder	I.	Deficient in available Carbon Dioxide.	
1607	Potted Meat ...	I.	Contained Starchy Filler.	

Preservatives.

All appropriate samples were examined for the presence of preservatives, and in all cases were found to conform with the Preservatives in Food Regulations.

FERTILISERS AND FEEDING STUFFS ACT, 1926.

The samples examined under the above Act during the year 1938 consisted of the following articles :—

Barley Meal ...	...	...	...	...	1
Compound Cake	...	...	...	...	4
Compound Meal	...	...	...	...	1
Flaked Maize ...	...	...	...	...	1
Meat Meal ...	...	...	...	...	1
Meat and Bone Meal	...	...	...	...	1
Oats, Ground ...	...	...	...	...	1
Sussex Ground Oats ...	...	...	...	...	3
Basic Slag ...	...	...	...	...	3
Compound Fertiliser ...	...	...	...	...	3
Nitrate of Soda	...	...	...	...	2
Sulphate of Ammonia	...	...	...	...	2
Superphosphate	...	...	...	...	2

25

One sample of Basic Slag was found to be deficient in phosphoric acid, one sample of Compound Fertiliser was somewhat deficient in potash, and the sample of Meat and Bone Meal was found to contain an excessive proportion of oil and was deficient in phosphoric acid. The remaining samples were satisfactory.

Miscellaneous.

Five waters were examined and reported on.

Forty-one samples of pasteurised milk were tested by the phosphatase test. Of these, 26 were classed as being adequately pasteurised, 5 as barely satisfactory, and 10 as inadequately pasteurised.

(Signed) R. W. SUTTON,

Borough Analyst.

ARTIFICIAL CREAM ACT, 1929.

So far as can be ascertained, no artificial cream is on sale in Derby.

Public Health (Preservatives in Food) Regulations, 1925 and 1927.

During the year, 166 samples of milk and 84 samples of various other articles of food were examined and found to comply with the regulations.

MERCHANDIZE MARKS ACT, 1926.

During the year, traders have kept well up to the requirements of the Act with regard to the marking of Imported Foodstuffs.

In cases where contraventions have occurred, the attention of the trader has been drawn to the matter, and the goods have been marked forthwith.

Factories Act, 1937.

The following are the Tables of action taken and work done.

INSPECTIONS.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

PREMISES.	NUMBER OF		
	INSPEC- TIONS.	WRITTEN NOTICES.	PROSE- CUTIONS.
Factories with mechanical power	168	3	...
Factories without mechanical power	170	9	...
Other premises under the Act (including works of building and engineering construction but not including outworkers' premises) ...	...	...	...
Total	338	12	...

DEFECTS FOUND.

PARTICULARS.	NUMBER OF DEFECTS.			NUMBER OF PROSECUTIONS.
	FOUND.	REMEDIED.	REFERRED TO H.M. INSP.	
Want of cleanliness	26	26	...	...
Overcrowding ... ..	...	...	...	...
Unreasonable temperature ...	...	...	...	...
Inadequate ventilation ...	1	1	...	...
Ineffective drainage of floors...	2	1	...	...
Sanitary Conveniences {	Insufficient ...	3	1	...
	Unsuitable or defective ...	26	9	...
	Not separate for sexes ...	...	...	...
Other offences (not including offences relating to Home Work or offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921, and re-enacted in the Third Schedule to the Factories Act, 1937).	17	16	...	...
Total	75	54	...	...

Inspections of Out-Workers or Home-Workers.

Pursuant to Section 107 of the Factory and Workshop Act, 1901, 40 lists of out-workers have been received from various firms in Derby. Of the out-workers, 29 were engaged in net-mending, 35 in altering, making or finishing wearing apparel, and 2 making surgical bandages. 25 lists with 148 names have been forwarded to Councils in whose areas out-workers employed by Derby firms reside.

During 1938, visits were made to the homes of these out-workers by the Female Sanitary Inspector. As a result of these visits, no verbal notices nor written notices were given or served.

The principal industries are net-mending and making or finishing wearing apparel, and the general character of the work repairing. The numbers are on the decrease.

Registered Factories.

Factories with mechanical power	...	...	...	...	...	453
„ without „ „	...	...	...	...	...	190
Bakehouses with mechanical power	...	...	...	...	...	28
„ without „ „	...	...	...	...	...	22
						693

Public Conveniences.

All the conveniences used by the Public throughout the town, whether situated in the Market Place or Parks, were inspected regularly by members of the staff, male and female, and were found invariably without complaint.

MICE AND RATS (DESTRUCTION) ACT, 1919.

Mr. E. A. HORNSBY, Officer under the Destructive Insects and Pests Acts, reports that :—

During the past twelve months more complaints have been received by the Department than for a number of years past, but this is probably due to the wider publicity given to the assistance rendered by the Department and not to the greater prevalence of rats.

Regular attention has again been paid to the Cattle Market, Slaughter-houses, and adjoining buildings and visits been regularly made to other Corporation premises.

Phosphorus paste poison and cyanide gas have been used to great advantage. During Rat Week, commencing 7th November, the sewers of the town were visited, five nights being spent on this work, a great quantity of bread and poison being laid down.

Excellent results attended this work and the Spondon Sewage Works reported that large numbers of dead rats were found at the Works as a result. Arrangements are being made for the sewers to be dealt with in this manner more frequently, as it is felt that better results are obtained from this side of the work than any other.

The following is a summary of visits and rats caught at Corporation premises :—

<i>Place.</i>	<i>Visits.</i>	<i>No. of Rats.</i>
Alvaston Lake and Tip ...	19	53
Alfreton Road Tip	7	18
Boundary House	12	6
City Hospital	7	4
Central Library, Wardwick ...	1	1
Cattle Market	45	63
Derby Butchers, Limited ...	5	124
Ford Street Yard	2	3
Market Hall, Albert St. Yard...	26	4
Mental Hospital	2	32
Spondon Sewage Works ...	11	103
Wholesale Market	4	8
Derby School	4	7
Brighton Road School	2	1
St. John's School	1	—
New School, Normanton ...	12	18
Dykes, back of Uttoxeter Road and Manor Road	18	14
Markeaton Brook	2	4
Normanton Rec. Ground ...	3	—
Burnaston Ground	3	—
Darley Park	3	4
Isolation Hospital	1	2

Three visits were made to the Normanton Barracks, one in co-operation with the rat-catcher employed by the London, Midland and Scottish Railway Company on the railway bank adjoining.

244 visits were paid to private residences, including Corporation houses, an increase compared with the previous year of 57. 162 rats were caught. In some cases poison was laid and advice given. Where necessary, broken drains were repaired. In this connection considerable assistance has been given by the Sanitary Inspectors.

20 complaints from private individuals were received during Rat Week and 31 supplied with poison, free of charge.

Common Lodging Houses.

Number on Register	...	...	...	...	...	...	...	6
Number of Rooms registered for Sleeping	...	...	...	...	...	...	...	63
Number of Lodgers provided for	...	...	...	...	...	...	...	428
Notices and Cautions given in respect of Breaches of the Acts and Bye-Laws	...	...	...	...	...	...	...	19

Practically all our old houses have now gone and the town is left with five absolutely good and modern places which would be a credit to any borough. Even with these few though, there is a chance of another being shut up and it gives me greatly to wonder where all the folks used to come from that years ago occupied the thirty or so hell's kitchens which were then in existence. Even today the majority of the habitues of the places we have are in permanent occupation and with the application of the new Public Health Act and the change of words from the 1875 Public Health Act, doubts are raised in my mind as to whether a Common Lodging House legally exists in Derby.

Houses Let in Lodgings.

Number on Register	...	...	...	...	...	...	...	16
These contain 84 rooms and have accommodation for 171 adults and 28 children.								
Notices and Cautions given to Landlords and Lodgers for various offences under the Bye-Laws	...	...	...	...	...	...	...	13

These abominable places should no longer exist—we have not one that in any way complies with our Byelaws—but the Corporation have agreed to build a place to house this derelict class. As I have said before, it is a great disgrace to our work that we have by force of circumstances to acknowledge their existence.

The worst feature of the whole business is that the empty larger houses are taken over and farmed out to these people when disturbed by slum clearance and town improvement. The agent then calls them flats—to the grave detriment of the value of adjoining properties.

Offensive Trades.

On Register at beginning of year	...	...	...	...	...	...	21
On Register at end of year	...	...	...	...	...	...	21
Factories without mechanical power	...	...	...	...	...	...	12
Factories with Mechanical power	...	...	...	...	...	...	9

LIST OF OFFENSIVE TRADES IN THE BOROUGH.

Bone Calcining	...	...	...	...	...	...	1
Bone Boiling	...	...	...	...	...	...	1
Gut Scraping	...	...	...	...	...	...	2
Hide and Skin Marts	...	...	...	...	...	...	2
Skin Curing	...	...	...	...	...	...	1
Blood Drying	...	...	...	...	...	...	1
Soap Boiling	...	...	...	...	...	...	1
Tripe Boiling	...	...	...	...	...	...	4
Dealers in rags, bones, and skins	...	...	...	...	...	...	4
Fat melting or extracting	...	...	...	...	...	...	2
Tallow Melting	...	...	...	...	...	...	1
Tanners and Leather Works	...	...	...	...	...	...	1
Total...							21

The position in respect of these trades is much the same as last year and no trouble has been experienced. We are still negotiating for bye-laws to govern the trade of fish frying.

CANAL BOATS ACT, 1884.

Annual Report for 1938, in accordance with Section 250 (Sub-Section 3) of the Public Health Act, 1936.

COUNTY BOROUGH OF DERBY.

1. Inspector and Salary ... Chief Inspector and Assistant.
No salary allocated.
Address ... 1, Derwent Street, Derby.
2. Boats inspected ... 2 Visits to Canal ... 59
3. Infringements of Acts and Regulations :—

(a) Registration	...	0	(j) Provision of water vessel	0
(b) Change of Master	...	0	(k) Removal of bilge water	0
(c) No Certificate on Board	0		(l) Notification of infectious	
(d) Absence of Marking	...	0	disease	...
(e) Overcrowding	...	0	(m) Admittance of Inspector	...
(f) Separation of Sex	...	0	(n) Boats found in bad	
(g) Cleanliness	...	0	repair	...
(h) Ventilation	...	0		...
(i) Painting	...	0		0
4. Legal Proceedings ... None.
5. Other steps taken ... None.
6. Cases of Infectious Disease dealt with ... None.
7. Detention of boats for cleansing and disinfection ... None.
8. Number of boats on Derby Register at end of year 1938...

(a) Number of boats believed to be in use or available	...	0
Number of boats propelled by motor	...	0
(b) Number of boats that cannot be traced	...	0
Removed from Register	...	13
9. Number of boats registered during 1938 :—

(a) Motor propelled	...	0
(b) Horse drawn	...	0

No certificates outstanding at end of the year.

HOUSES OF ENTERTAINMENT.

There have been many inspections at the request of the Estates Committee and where it is deemed that in one or two instances the sanitary requirements have fallen short of the needs, arrangements have been made at the annual licensing for the alterations to take place.

RENTS RESTRICTION.

During the year no certificates were issued.

POLICE COURT PROCEEDINGS.

<i>Charge.</i>	<i>Result.</i>
Permitting overcrowding.	Dismissed on payment of costs—4/-.
Using a mechanically operated instrument in the stunning of an animal in such a manner or in such circumstances as to cause the risk of unnecessary suffering.	Fined £1 and costs.
Obstruction under section 288 of the Public Health Act, 1936.	Fined £2 and 5/- for each day on which the offence continued
Permitting overcrowding.	Fined 10/-.
Contravention of sections 116 and 117 of the Public Health Act, 1875.	Fined £3 on each charge (two charges).
Contravention of section 8 of the Meat Regulations, 1924.	Fined £3.
Contravention of sections 9 and 10 of the Meat Regulations, 1924.	Fined £3 on each charge (two charges).
Selling milk with 12% added water.	Fined £1 and costs.
Exposing three pieces of meat for sale—three cases of depositing unsound meat for sale intended for the food of man (six cases in all).	Fined £2 in each case (£12 in all).
Dangerous building under section 58 of the Public Health Act, 1936.	To make the house safe for the inmates and pedestrians within fourteen days.

The usual changes have taken place in the staff owing to younger men taking more lucrative posts elsewhere. This disorganises all the work and ordinary routine matters take on the significance of important duties needing the assistance of other members of the staff.

I have to thank you, Sir, for the splendid help and cheer you have given me during the year, and with that feeling between us and the staff, the town's work is far better accomplished.

I am,

Yours faithfully,

HARRY J. MORGAN,

Chief Sanitary Inspector.





